## Report of PLACE Assessments in Karaganda, Kazakhstan, Central Asia

### 2002 and 2003



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#### **Executive Summary**

#### Why was PLACE conducted in Karaganda, Kazakhstan?

There is limited HIV surveillance in Kazakhstan. In 2001, available surveillance data suggested that the HIV epidemic is concentrated among urban injection drug users (IDUs). Models of the epidemic predicted that it could spread from IDUs to the general population via heterosexual transmission. The PLACE (Priorities for Local AIDS Control Efforts) protocol was implemented in Karaganda in 2002 to determine whether there was any evidence of overlap in the injecting drug user and sexual networks and to identify where HIV prevention efforts should focus to minimize HIV transmission. A follow-up assessment was planned for 2003 to determine to what extent AIDS prevention programs had successfully reached target sites and whether gaps remained in program coverage. This report summarizes the findings of these two assessments.

Unfortunately, the interim period between assessments was not sufficient to implement the range of prevention activities anticipated. Consequently, the "follow-up" assessment in 2003 was essentially a repeat of the 2002 assessment, although some improvements were made to the protocol and additional objectives added. Funding for these assessments was provided by USAID through the MEASURE *Evaluation* project.

#### What were the specific aims of the PLACE protocol?

The specific aims of PLACE 2002 and PLACE 2003 were to identify areas within the city and specific sites within these areas where HIV transmission is likely to occur and to examine the change in these over time. There were several additional secondary objectives of the 2003 study, including an assessment of the reliability of the method to monitor, in absence of an intervention, the characteristics of sites where people meet new sexual partners, commercial sex workers solicit clients, and injection drug users socialize as well as the characteristics of people who socialize at these sites. Secondly, the assessment included additional questions provided by local intervention groups to help focus and monitor prevention programs. Finally, the assessment sought to collect more complete information to estimate the size of most at risk populations in Karaganda.

Sexual and IDU networks in Karaganda are extensive and diffuse but stable. There was significant overlap between youth, sex workers, clients, and IDUs socializing at sites.

Two PLACE assessments were conducted in Karaganda, Kazakhstan one year apart. With a couple of notable exceptions, such as increased condom availability at sites and an increase of injection drug use and sex work at sites, the characteristics of the sites and the people socialize at them remained stable from 2002 to 2003.

Almost 650 unique sites in 2002 and over 550 in 2003 where people meet new sexual partners, commercial sex workers solicit clients, and/or injection drug users socialize were reported by 1,604 key informants. There was significant overlap of youth, injection drug users, and commercial sex workers and clients socializing at the sites. Individuals socializing at over 60% of the sites met new sexual partners while at the sites and injection drug users socialized at over half of the sites. In fact, over a third of the sites had both individuals who met new sexual partners and injection drug users

socializing there. Approximately 14% of sites in 2002 and 28% in 2003 had individuals who met new sexual partners, at least some youth, commercial sex workers soliciting clients, and IDUs socializing at the site. Sites with overlapping, high-risk populations serve as a bridge between the sexual and drug use networks and can potentially facilitate the spread of the epidemic from one concentrated among the IDU population to an epidemic with widespread heterosexual transmission.

## The rate of new partnership formation was high, particularly among youth. A high proportion of men visited commercial sex workers.

Approximately 2,850 individuals socializing at 175 sites were interviewed. This sample included 1,461 youth, 480 commercial sex workers and 423 clients, and 506 injection drug users. Over 40% of men and women socializing at the sites in 2002 and half in 2003 reported at least one new partner during the past four weeks. Among youth, the proportion was even higher with half of male and female youth in 2002 and 57% of male youth and 68% of female youth in 2003 reporting at least one new partner in the past four weeks. Approximately two thirds of men and over half of women who reported a regular long-term partner also reported at least one new partner during the previous 12 months. A quarter of men had given money in exchange for sex during the past three months. Two thirds of men in the representative sample who gave money in exchange for sex during the past three months also had a regular, long-term sexual partner.

#### Condom availability increased and use was high, but not consistent, with new partners.

The proportion of sites where condoms were always available during the past 12 months increased from 25% in 2002 to 38% in 2003. Similarly, the proportion of interviewers who saw condoms at the site on the day of the interview increased from 19% in 2002 to 36% in 2003. Reported condom use with new partners remained high among all sub-populations in 2002 and 2003. Among patrons with at least one new partner in the past four weeks, two thirds of men and 80% of women reported using a condom with their last new partner in the past four weeks. However, condom use was self-reported and could potentially be over-reported. The proportion who reported always using a condom with new partners in the past four weeks was substantially lower indicating that condom use with new partners was not consistent.

## Perception of drug use in the area increased. High risk behaviors by IDUs, including needle sharing and taking drugs from a common reservoir, were stable.

The proportion of site representatives and individuals socializing at the sites who thought that injection drug use was very or somewhat common in the area increased substantially from 2002 to 2003. In 2003, two thirds of site representatives and three quarters of individuals socializing at the sites thought that injection drug use was very or somewhat common compared to 55% of site representatives and less than half of socializing individuals the previous year. Similarly, the proportion of site representatives who reported that injection drug users could be found at the site increased from 51% in 2002 to 63% in 2003, the proportion of men in the representative sample who had ever injected drugs increased from 27% to 42%, and the proportion of current IDUs increased from 21% to 36%. The proportion of key informants who thought that injection drug use occurred in the area was high both years (80%) but the proportion of site reports for sites where IDUs could be found increased from 39% to 61%.

High risk behaviors among IDUs remained stable from 2002 to 2003. Among male IDUs who had injected drugs within the past six months, 19% shared a syringe at last injection, 32% had shared a syringe in the past four weeks, and 37% got a new syringe in the past four weeks. Always injecting with the same group was the main social context in which most male IDUs took drugs but different contexts depending on the circumstances and injecting individually were also frequent contexts for taking drugs. A quarter of male IDUs used a ready made drug solution without boiling and 67% in 2002 and 56% in 2003 took drugs from a common reservoir in the past four weeks. The proportion that had been arrest for injecting drugs decreased from 57% to 48%.

#### **Program implications of the assessment:**

Interventions need to be focused on sites where people meet new partners, youth socialize, commercial sex workers solicit clients, and injection drug users socialize while maintaining a strong general population prevention program.

The PLACE method provided significant insight into the sexual and injection drug use networks in Karaganda. These networks were extensive and diffuse and there was significant overlap between high-risk populations socializing at the sites. Priority sites for intervention should include sites where people meet new sexual partners, youth socialize, commercial sex workers solicit clients, and injection drug users socialize, and in particular where these high-risk populations overlap. These overlap sites should be targeted with a site-based prevention program to reduce the likelihood of transmission across different physical modes of transmission and across different risk population subgroups. Characteristics of the individuals socializing at these priority sites can be used to develop and tailor prevention programs and for indicators to monitor the intervention.

### **Summary of Indicators from Assessment**

Docults from	DI ACE Acc	ocemante in Kana	ganda Kazakheta	n. 2002 and 2003:
Results from	PLACE ASS	essments in Kara	ganda. Kazakhsta	n. 2002 and 2003:

Partners: USAID/CAR, MEASURE *Evaluation* Project at UNC, Center for the Study of Public Opinion, Almaty

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Population	440,000

#### **Scope of Assessment**

	2002	2003
City-wide assessment	Yes	Yes
Identification of areas or "units" of city and social sites within "units" where people meet new partners and/or drug injectors socialize	Yes	Yes
Mapping of sites	Yes	Yes
Characterization of sexual and injecting networks at sites	Yes	Yes
Characterization of overlaps of sexual and injecting networks	Yes	Yes
Identification of gaps in prevention programs	Yes	Yes

## Step 1 Results from Focus Groups/In-Depth Interviews to Identify Units of the City Where People Meet New Sexual Partners and Where IDUs can be Found

	2002	2003
Number of Focus Group Discussions held	6	0
Number of In-Depth interviews held with police and IDU	15	0

## Step 2 Results from Key Informant Interviews Within Areas to Identify Specific Sites Where People Meet Sexual Partners or Where Drug Injectors Can be Found

	2002	2003
Days of key informant interviewing	5	6
Number of interviewers	26	23
Number of key informant interviews	900	704
Number of refusals for key informant interviews	<del></del>	29
Number of key informant reports	3140	2042
Number of sites reported in areas where KI interviewed	882	
Number of sites reported in other units	2258	
Number of unique sites reported in all units	645	556
Percent of Key Informants who:		
Believe injecting drug use occurs in area	79%	80%
Has seen syringes lying around in last four weeks in area	34%	44%
Report sex workers solicit customers in area	56%	58%
Percent of sites reported where Key Informants believe:		
People meet new sexual partners	74%	80%
IDUs can be found	39%	61%
Syringes can be found	30%	51%
Sex workers solicit customers	66%	72%

Characteristics of Sites and Patrons as Reported by a Site Representative at the Si	ts in Step 2 te and Interviewe	r Observation
	2002	2003
Total Number of Unique Sites Named by Key Informants	645	556
Number of Refusals, Sites not Found, Sites Closed, Duplicate Sites	59	35
Number of Sites Excluded		
Note: Criteria for excluding sites for site verification were based on number of times the site was	143	202
named by key informants, location, and type of site.  Number of Sites Visited, Verified, Characterized	N=443	N=319
% of sites where site representative reports that:	11-443	11-319
People meet new sexual partners at site	61.0	65.2
Injection drug users can be found at site	51.0	62.5
People meet new sexual partners and IDUs are at site	33.0	43.3
People meet new sexual partners <u>or</u> IDUs are at site	79.0	84.5
Type of site (By observation):	24.2	27.7
Bar, Café, Restaurant	24.2	27.7
Night Club, Disco, Casino	2.3	2.1
• Sauna	2.5	1.8
• Hotel	1.4	2.1
Billiards, Game Club, Computer Club	1.4	0.9
Dormitory, Private Apartment, Flat	6.1	6.7
<ul> <li>Basement, Roof, Stairwells, Unused Abandoned Building</li> </ul>	11.1	5.8
• School, College, Technical	2.7	6.4
• Street, Waste, Yard	9.0	5.6
Activities Onsite (By interview):	05.1	0.4.2
• Beer	85.1	84.2
Hard Alcohol	71.8	77.4
• Computer Games	4.1	3.7
• Eating	63.7	53.7
• Dancing	33.4	34.8
• Striptease	2.0	1.2
Sexual Partnerships Formed Onsite (By interview):	60.2	612
Men meet women	60.3	64.3
• Women meet men	59.4	63.7
• Men meet men	7.9	7.3
Someone facilitates partnership formation	7.0	9.5
Sex workers solicit  Personal of cities with Petrona who are (Projectory).	24.6	43.9
Percent of sites with Patrons who are (By interview):	79.5	73.8
Male students		68.9
• Female students	76.1 72.5	62.8
• Men under age 18	73.1	64.9
• Women under age 18		
Male IDUs	39.3	52.4
Female IDUs  Perception of how common IDU is in area (By interview):	26.2	45.1
Very common  Output  Very common  Output  Duils in area (By interview):  Very common	16.0	19.5
Very common     Somewhat common	38.6	44.2
	38.8	25.9
<ul><li>Not very common</li><li>Does not occur</li></ul>	6.6	10.4
<ul> <li>Does not occur</li> <li>Percent who have seen used syringes lying inside or outside sites</li> </ul>	36.6	42.4
Condoms and AIDS Prevention (mostly by interview):	30.0	72.7
% where condoms never available past 12 months	61.0	37.5
where condoms never available past 12 months     where condoms seen on site (observation)	18.5	35.7
where condoms seen on site (observation)     where condoms available within 10 minutes	77.9	79.0
where condoms available within 10 minutes     where sites willing to sell condoms	51.9	63.7
<ul> <li>where sites withing to sen condoms</li> <li>% that ever had HIV/AIDS prevention programs</li> </ul>	6.3	9.8
<ul> <li>% utility to have AIDS prevention program</li> </ul>	57.8	47.1

Step 4 Results from Interviews with People Socializing at Sites Where People Meet New Sexual Partners and				
Injection Drug Users Socialize - Characteristics of Peop	ole at Sites			
	2002 (%)	2003 (%)		
Number of sites where interviews conducted	107	68		
% of verified sites where individual interviews conducted	24.2	21.3		
Number of men interviewed	998	510		
Percent of Men (age 18 and older) Socializing at Sites Who:				
• Are 18-24	42.7	43.9		
Are married or living in union	41.5	42.2		
Employed fulltime	50.8	51.0		
• Are students	18.5	15.3		
• Visit the site every day	28.3	27.7		
Believe people meet new sexual partners at site	69.0	73.7		
Have ever attracted a new sexual partner at the site	29.8	35.5		
- Of those, used a condom with most recent partner from site	47.0	57.5		
<ul> <li>Have a condom with them that was seen by interviewer</li> </ul>	10.0	26.9		
Rate of Partnerships:				
Had a new sexual partner in the past four weeks	42.8	51.0		
- Of those, used a condom with most recent new partner	64.6	66.5		
• Had a new sexual partner in the past 12 months	72.4	78.4		
Have a regular, long-term partner	71.0	68.6		
Have had sex with a man in the past four weeks	1.2	3.9		
• Given money or gifts in exchange for sex in the past three months	28.1	27.5		
Percent of Men Socializing at Sites Who:	10.6	45 1		
Believe drug use is very common in area	10.6	45.1		
Believe that IDUs socialize at site of interview	58.2	73.1		
Have ever injected drugs	27.0	41.6		
-Of those who injected drugs in the past six months	10.1	10.0		
- Shared a needle the last time he injected	19.1	19.2		
Number of women interviewed	853	490		
Percent of Women (age 18 and older) Socializing at Sites Who:	57.2	50.7		
• Are 18-24	57.2	52.7		
Are married or living in union	31.9	33.1		
Employed fulltime	35.8	36.1		
• Are students	21.0	14.3		
• Visit the site every day	26.3	30.4		
<ul> <li>Believe people meet new sexual partners at site</li> </ul>	73.4	78.2		
Have ever attracted a new sexual partner at the site	37.9	46.5		
- Of those, used a condom with most recent partner from site	74.7	80.9		
Have a condom with them that was seen by interviewer	16.1	30.6		
Rate of Partnerships:				
Had a new sexual partner in the past four weeks	43.8	54.9		
- Of those, used a condom with most recent new partner	81.2	79.2		
• Had a new sexual partner in the past 12 months	60.8	67.8		
Have a regular, long-term partner	63.6	61.4		
<ul> <li>Received money or gifts in for sex in the past three months</li> </ul>	31.8	40.8		
Percent of Women Socializing at Sites Who:				
Believe drug use is very common in area	8.8	39.4		
• Believe that IDUs socialize at site of interview	56.0	67.6		
Have ever injected drugs	12.6	12.0		
-Of those who injected drugs in the past six months				
- Shared a needle the last time she injected	12.7	19.4		

#### **Background and Objectives**

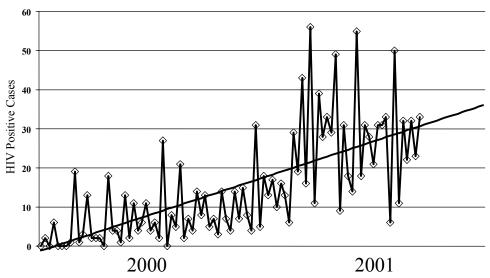
This report compares the results from the 2002 and 2003 PLACE assessments in Karaganda, Kazakhstan. A comparison of the 2002 results from Karaganda with the results from Almaty, Osh, and Tashkent are available in a separate report as are the comparisons of the 2002 and 2003 assessments for each of these cities.

#### A. Background and Objectives

#### Status of HIV/AIDS epidemic in Kazakhstan

Kazakhstan, compared to other parts of the world, has a relatively low prevalence of HIV infection. The spread of HIV was sporadic until 1996 when HIV among IDUs began to emerge (1, 2). Initially all confirmed HIV positive cases were confined to the Karaganda region although now all oblasts have confirmed HIV+ cases (2). The epidemic is now characterized by rapid transmission of the HIV virus with the number of registered cases doubling each year since 2000 (2). By January 2002, 2,230 cumulative cases of HIV had been officially reported (3). However, Kazakhstan does not have a functioning sentinel surveillance system and USAID in its regional strategy document estimated that the actual number of HIV cases was 10 times higher. The low prevalence of infection, however, may mask high incidence of infection among some sub-populations in particular geographic areas of the region. The USAID CAR Regional Strategy suggests that incidence may be increasing (Figure 1).

Figure 1. Weekly reported incidence of HIV cases in Kazakhstan, government statistics 2000-2001.



Based on reported HIV cases, models have been developed to project the number of HIV infections in Kazakhstan between 2000 and 2005. These models assume (per CDC regional office estimates) that the prevalence of HIV infection among injecting drug users was 18% in 2000 and that there were 200,000 injecting drug users in Kazakhstan in 2000. The highest projection assumes that the epidemic moves from being concentrated among injection drug users to one that includes more widespread heterosexual transmission (Figure 2). According to these projections, the HIV incidence rate would be more than 300 cases per week in 2005, corresponding to a HIV prevalence rate of 0.3% (3). If these

figures are adjusted to take into account that only 10% of the cases are included in these estimates, HIV incidence would increase to 3% and approximately 450,000 people would be infected with HIV by the end of 2005. According to the regional strategy: "Given a similar pattern of HIV infection in the other four Central Asian countries, unless urgent measures are taken to prevent the further spread of the epidemic, the number of people living with HIV/AIDS in Central Asia (total population of 55 million) could reach 1.65 million by the year 2005."

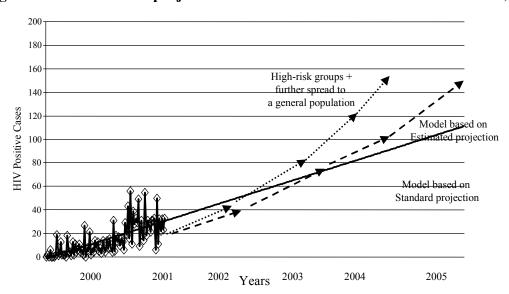


Figure 2. Estimated and projected HIV/AIDS incidence rates in Kazakhstan, 2000-2005.

MEASURE *Evaluation* did not critically review these projections. However, they are useful figures for understanding the urgency of the USAID regional strategy and the role of the PLACE assessments in identifying where interventions should be focused.

#### B. Role of PLACE Assessments in USAID Regional Strategy

In December 2001, MEASURE *Evaluation* met with the Central Asia Regional Office of USAID to negotiate a scope of work for implementing PLACE assessments to support the Regional AIDS prevention strategy. MEASURE *Evaluation* agreed to provide technical assistance to the region for focusing, informing, and monitoring AIDS prevention programs using the PLACE method. USAID wants a comprehensive and integrated approach to HIV/AIDS prevention in Central Asia during the period when window of intervention opportunity may be closing rapidly. USAID target populations for intervention include "vulnerable" youth aged 15 to 25 years and people engaging in high risk behaviors such as injecting drug users (IDUs) and commercial sex workers and their clients.

Between December 2001 and April 2002 a strategy for implementing PLACE assessments was developed based on discussion with the CAR Regional Office. Key features of this strategy include the following:

• Initial implementation of the assessment in Almaty, Kazakhstan and subsequently in an additional three cities, Karaganda, Kazakhstan, Osh, Kyrgyzstan, and Tashkent, Uzbekistan, along the narcotic trade routes from Afghanistan to Eastern Europe.

Almaty was selected to serve as the pilot city for the region during which the protocol, indicators, and training materials were fully adapted to the pattern of injection drug use and sexual partnerships in the region. In addition, the Almaty assessment served as hands-on experience for a team of trainers from Karaganda, Osh, and Tashkent, who carried the method to their cities for assessments in 2002 and 2003.

• Re-assessment in 2003.

The strategy covered 18 months of activities. There is a strong commitment to building local capacity for implementing the assessments. The assessments occurred in cities where USAID is supporting harm reduction and condom promotion programs according to a time frame that allows the assessments to provide data for monitoring programs.

#### C. Objectives of PLACE in the USAID Regional Strategy

Overall, the role of the PLACE method in the Region is to focus, inform, and monitor AIDS prevention activities. The method was considered appropriate because the epidemic is geographically clustered and a site-based approach for prevention programming is reasonable. Specific objectives of the PLACE assessments:

- To describe sexual and injection drug use networks in cities with highest incidence of HIV infection, specifically:
  - To identify and map geographic areas within each city where the networks operate and sites within these areas where injection drug users and people with high rates of new partner acquisition can be accessed
  - To describe the socio-demographic and behavioral characteristics of members of the networks, their knowledge of AIDS transmission routes and protective behaviors, and their exposure to interventions
  - To estimate the extent of youth participation in networks.
- Within each city, to identify specific priority sites for condom promotion and harm reduction programs so that educational messages, condoms, and clean needles are accessible to sexual and injection drug use networks, with a particular focus on youth
- To provide site-based indicators for each city of the extent to which:
  - injection drug users have access to harm reduction programs
  - people who have many new sexual partners have access to and use condoms
  - there is overlap between the IDU and sex networks

The assessment was divided into four phases:

- (1) a preparation phase that occurred before the first PLACE assessment was fielded;
- (2) a pilot phase during which the first assessment was conducted under heavy scrutiny;

- (3) a roll-out phase where the method was implemented in several cities; and
- (4) 2003 assessments that occurred in May-August 2003

#### <u>Preparation Phase Activities January – April 2002</u>

MEASURE Evaluation staff discussed with PSI/Washington and the Mission how the PLACE
protocol could be adapted to provide maximum information to condom social marketing and youth
programs.

- PLACE data collection forms were revised based on information from PSI and Soros Foundation. Final questionnaires and protocol were ready by February 27, 2002. The process for obtaining ethical review of the protocol in Kazakhstan in general and in Almaty in particular was determined and there were initial efforts to identify maps.
- The PLACE protocol was submitted to UNC Institutional Review Board for ethics review in March, 2002, and field work members and a local field work coordinator were identified.

#### Pilot Phase: Implementation of PLACE Protocol in Almaty, Kazakhstan May-June 2002

- Implementation of PLACE protocol in Almaty (May 2002)
- Protocol revised for other cities

#### Roll-Out Phase for 2002 Assessments (May-November 2002)

- Workshop for cities interested in implementing PLACE protocol (May, 2002)
- Follow-up email to detail timeframes, budgets, and subagreements
- Implementation of PLACE protocol in other cities
- Preliminary results and tables provided (November 2002)
- Feedback session for 2002 Assessment Results held in Almaty with local intervention groups (June 2003)
- Final report for 2002 Assessments available (Spring 2004)

#### 2003 Assessments (June-October 2003)

• Implementation in Almaty, Karaganda, Osh and Tashkent (June-October 2003)

#### D. Overview of the PLACE Protocol

Methods for monitoring and evaluating AIDS prevention efforts are urgently needed. Because resources for interventions are limited, there is an immediate need to focus interventions where they are most cost-effective. Identifying geographic areas where HIV incidence is highest has proven challenging because of the difficulty of identifying these areas using low-tech approaches that can be locally implemented. Population-based sero-surveys to identify empirically areas with high HIV incidence are rarely conducted due to cost, feasibility, loss to follow-up, and ethical concerns. The PLACE (Priorities for Local AIDS Control Efforts) method is a monitoring tool to identify high transmission areas and the specific sites within these areas where AIDS prevention programs should be focused.

The PLACE approach acknowledges that contextual factors are often associated with areas where HIV incidence is high. These include:

- Poverty and unemployment
- Drug abuse
- Crime
- Lack of health care services
- Alcohol consumption
- High population mobility
- Urbanization and rapid growth
- High male to female ratio.

Consequently, the first step in the PLACE method is to use available epidemiologic and contextual information to identify areas in a city or health district likely to have a higher incidence of HIV infection (Figure 3). Subsequent steps use rapid field methods to identify and characterize sites within these areas where people with many new sexual partners and/or where injecting drug users can be reached for prevention interventions. Characteristics of the people who socialize at these sites are obtained to confirm whether interventions at these sites would reach people with a high rate of new partner acquisition and/or people who inject drugs. Finally, the data are used to inform interventions in the area.

The method focuses on places where new sexual partnerships are formed and places where injection drug users can be reached because the pattern of new sexual and needle sharing partnerships in a community shapes its HIV epidemic. This method was developed at the University of North Carolina and pilot tested in 1999 in Cape Town, South Africa in collaboration with the University of Cape Town. USAID has supported development of the method through MEASURE *Evaluation* Project.

Figure 3. The five steps of the PLACE protocol.

Step	Objective
1	To identify areas in the city where HIV incidence is likely to be high
2	Within these areas, to identify specific sites where people meet new sexual partners and where IDUs socialize
3	To visit, map, and characterize these sites
4	To describe the characteristics of people socializing at sites
5	To use findings to inform interventions

#### Step 1: Identifying Areas for Assessment in Karaganda

#### A. Objectives

The objective of the first step of the PLACE method is to identify areas of Karaganda where HIV incidence is likely to be high and to determine which of these areas will be fully assessed in subsequent steps of the method.

#### B. Method

The USAID regional strategy includes improving HIV surveillance. However, at the time that these assessments were conducted, HIV surveillance data were not available to identify particular areas in Karaganda where HIV incidence was highest. In 2002, six focus group discussions with people knowledgeable about sexual networks and injecting drug use in the city were held to identify high incidence areas in Karaganda. These focus group discussions were composed of a wide range of people including commercial sex workers, drug injectors, physicians, taxi drivers, and youth. In-depth interviews were also conducted with police officers and others. The goal of these focus group discussions and in-depth interviews was to identify priority areas for intervention within the city including:

- areas where people meet new sexual partners;
- areas where sex workers solicit clients; and
- areas where injecting drug users can be found.

Areas were defined according to a set of geographic units. The geographic units were based on administrative divisions of the city that were well-known to participants so that they could readily identify areas and discuss differences between areas. After the focus group discussions and in-depth interviews, the decision was made to include the entire city of Karaganda in the 2002 assessment. The size of the city allowed the PLACE protocol feasibly to be conducted in each of the 32 post office units in Karaganda.

Since the 2002 PLACE study successfully covered the entire city of Karaganda, the 2003 assessment also included the entire city. Each of the 32 post office units was included in the 2003 study.

#### C. Coordination

The MEASURE *Evaluation* Project provided technical assistance for the 2002 and 2003 assessments including questionnaire and protocol development and funding through USAID/Central Asia. The director of the Center for the Study of Public Opinion in Almaty, Kazakhstan served as the local principal investigator for the Karaganda assessments. A workshop was held in Almaty in June 2003 to disseminate the results of the 2002 study back to USAID, PSI, Soros Foundation, UNAIDS, the City AIDS Center, and other organizations currently or planning to carry out interventions in the region.

#### D. Training and Instrument Adaptation

The PLACE protocol was adapted to local needs and circumstances. The questionnaires were modified to target four groups of people including a representative sample of individuals socializing at the sites, commercial sex workers and their clients, injection drug users socializing at the sites, and youth. The study instruments were translated into Russian and back-translated into English. Interviewers were selected based on their social skills, knowledge of the layout of the areas, willingness to visit sites during evening and weekend hours, and their capacity to interview professional people as well as street youth, sex workers, and injection drug users.

The method was first implemented in the region in Almaty, Kazakhstan and subsequently in Karaganda, Kazakhstan, Osh, Kyrgyzstan and Tashkent, Uzbekistan. Almaty served as a pilot city for the region during which the protocol, indicators, and training materials were fully adapted to the pattern of injection drug use and sexual partnerships in the region. It also served as a learning experience for two people from each of the other cities who carried out the method with input from the Almaty experience. The people trained in Almaty subsequently trained their team in Karaganda.

Comments by local intervention groups from the results feedback session for the 2002 study about questionnaire improvement and inclusion of additional questions useful for intervention groups were incorporated into the questionnaires for the 2003 study. These additional questions will enable local intervention groups to monitor program coverage.

A day of interview training was performed prior to each new phase of the study and included presentations on the study rationale, objective, and methods. Training also included instructions regarding how to ask questions, record responses, and handle problems in the field, discussions on ethics, and a thorough review and discussion of each question to be asked of interviewees.

The Institutional Review Board at the University of North Carolina's School of Public Health approved the study protocol and served as oversight body.

## Step 2: Where Do People Meet New Sexual Partners and/or Injection Drug Users Socialize? Findings from Key Informant Interviews

#### A. Objectives

The objective of the key informant interviews is to identify sites within the priority areas where

- People meet new sexual partners
- Injection drug users (IDUs) socialize
- Sex workers solicit clients

A sexual network site is defined as a place or event in an area where people with high rates of partner acquisition meet to form new sexual partnerships. A site can be a bar, brothel, disco, street corner, or alley. New partnerships are the focus because individuals with high rates of new partner acquisition are more likely to transmit infection and because newly acquired infection is more infectious. HIV can also be transmitted through a network of injection drug users who share needles. Thus, sites where IDUs socialize and can be reached for prevention are also a focus of this method. Identification of all sites in a study area, not just traditional 'hot spots,' is encouraged.

#### B. Methods to Identify Sites

Key informant interviewing is the primary method to identify all sites where residents of the study area meet new sexual partners and where injection drug users socialize. The local principal investigator and field coordinator decided on a target number of key informant interviews and developed a strategy to identify key informants. Individuals such as taxi drivers, market venders, bar managers, unemployed youth, and police were approached for an interview at a time that seemed mutually convenient. Only people that were below the age of 18 were ineligible to be interviewed as key informants.

Potential key informants were approached by the interviewers who explained the purpose of the study and requested verbal informed consent. After recording basic demographic information about the key informant such as age, residence, and type of key informant, interviewers asked if injection drug use and commercial sex work was common in the area where the interview was being performed. Finally, the key informants were asked to name sites were people meet new sexual partners in the area, where IDUs socialize, and where sex workers solicit clients. Information collected about each site included its name, type of site, geographic code and specific address, and whether people meet new partners and/or IDUs or used syringes can be found at the site. During the 2002 study, key informants were asked to prioritize sites based on activities at the site such as people meeting new sexual partners, commercial sex work, and injection drug use. During the 2003 study, rather than prioritizing sites based on activities at the site, location of the site relative to the location of the key informant interview was recorded. Key informants were asked whether the site was a ten minute walk or further from the site of the interview.

Key informant interviews were continued until the target number of interviews had been achieved. A target of 900 interviews was set for the 2002 study and 700 key informant interviews for the 2003 study. The number of interviews was divided evenly among the units of the city included in the study.

#### C. Results

Key informant interviews were completed in five days in 2002 and six days in 2003. The target number of interviews was reached in both studies. During the 2002 study there were 3,140 site reports yielding 645 unique sites (Table 1). During the 2003 study there were 2,042 sites yielding 1,142 unique sites. An average 3.5 sites were named per key informant during the 2002 study and

Table 1. Summary of Key Informant Field Work

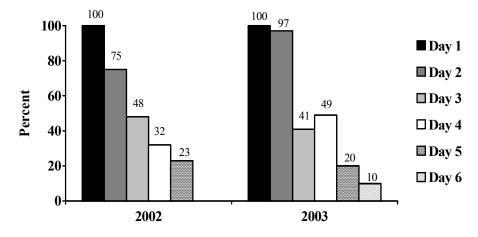
	2002	2003
Days of key informant interviewing	5	6
Number of interviewers	26	23
Total key informant interviews	900	704
Number of refusals for interviews	*	29
Number of key informant reports	3,140	2,042
Number of sites reported inside interview unit (2002) / within a 10 minute walk of location of interview (2003)	882	900
Number of sites reported outside unit (2002) / further than a 10 minute walk (2003)	2,258	1,142
Number of unique sites reported	645	556

<sup>\*</sup> Incomplete recording of refusals in 2002

an average of 2.9 sites were named per key informant during the 2003 study.

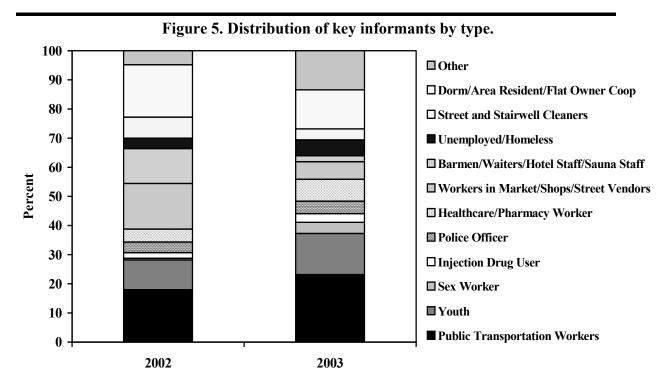
Key informant interviews were conducted until the target number of interviews was achieved. Even though the number of people interviewed remained constant each day, the number of new sites reported each day decreased throughout the interviewing period (Figure 4). On the last day of interviews, less than a fourth of the sites reported were new sites during the 2002 study and only 10% were new during the 2003 study.

Figure 4. Proportion of sites reported during each day of key informant interviews that were reported for the first time.



#### Characteristics of Key Informants

Half (51%) of the key informants interviewed in 2002 and 57% interviewed during the 2003 study were men. Individuals of all ages were interviewed.



Taxi drivers, youth, and residents of the area were the most numerous types of key informants in both the 2002 and 2003 studies but a wide variety of individuals were interviewed during each study (Figure 5).

#### Most Productive Key Informants

Taxi drivers and police officers were the most productive key informants during the 2002 study. On average, these individuals named four sites where either people meet new sexual partners, commercial sex workers solicit clients, injection drug users socialize, and/or used syringes can be found. During the 2003 study, commercial sex workers and clients and police officers were the most productive key informants. On average, these individuals named 3.5 sites where the activities of interest occur.

During the 2002 study, the most productive key informants for naming sites inside the interview unit were individuals who lived and worked within the area. These individuals included flat owners coop personnel, and street and stairwell cleaners. Taxi drivers, commercial sex workers and clients, hotel staff, and police officers were some of the most productive key informants for naming sites outside the interview unit. On average, key informants named more sites outside the unit in which they were interviewed than inside (1.0 vs. 2.5, respectively).

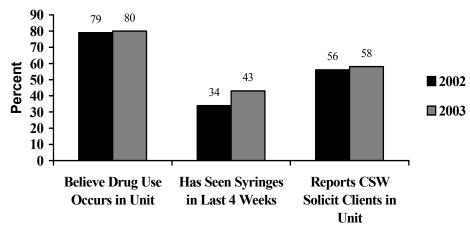
For the 2003 study, key informants were asked to distinguish between sites that were within a ten minute walk of the place of interview and sites that were further away. As in the 2002 study, individuals who lived and worked in the area were the most productive key informants for naming sites within a ten minute walk of the place of the interview. These individuals include flat owners coop personnel, street and stairwell cleaners, police officers, and IDUs. The most productive key informants for naming sites further than a ten minute walk from the place of interview include taxi drivers, clients of sex workers, and police officers. On average, key informants named slightly more sites further than

a 10-minute walk from where they were interviewed than within a ten minute walk (1.3 vs. 1.6, respectively).

#### Key Informant Opinion of Drug Use and Sex Work in the Unit

Key informants believed that both injection drug use and commercial sex work were common in the area. In 2002 and 2003, approximately 80% of key informant thought that injection drug use occurred in the unit of interview and almost 60% thought that commercial sex worker solicited clients in the area (Figure 6). The proportion who had seen a used syringe lying on the ground increased from 34% in 2002 to 44% in 2003.

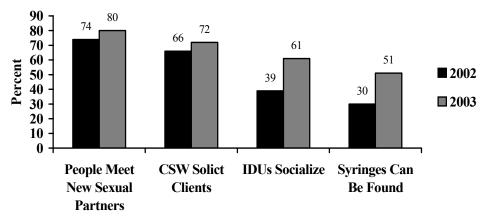
Figure 6. Proportion of key informants who reported injection drug use and commercial sex work within unit of interview.



#### Sites Where People Meet Sexual Partners and Injection Drug Users Socialize

Key informants classified each site that they reported according to whether: (1) people meet new sexual partners at the site, (2) IDUs socialize at the site, (3) syringes are lying on the ground near the site, and/or (4) commercial sex workers solicit clients at the site. Key informants during both the 2002 and 2003 studies named more sites where people meet new sexual partners, commercial sex workers solicit customers than sites where IDUs socialize, and/or syringes can be found lying on the ground (Figure 7). However, the proportion of sites named where IDUs socialize and syringes can be found increased substantially from 2002 to 2003 and the proportion where people meet new sexual partners and commercial sex workers solicited clients increased slightly.

Figure 7. Proportion of sites named by key informants that were identified as high-risk sites.



Percent of Sites Reported Where Key Informants Believe. .

Clients of commercial sex workers, barmen and waiters, and youth in 2002 and commercial sex workers and clients, police officers, and taxi drivers in 2003 were some of the most productive key informants for identifying sites where people meet new sexual partners. Taxi drivers, commercial sex workers and clients, and police officers were the most productive key informants during both the 2002 and 2003 studies for identifying sites where commercial sex workers solicit clients. The most productive key informants for identifying where IDUs socialize included taxi drivers, police officers, injection drug users, and pharmacy workers during the 2002 assessment and IDUs, commercial sex workers, police officers, and flat owners coop personnel during the 2003 assessment. Street and stairwell cleaners, injection drug users, pharmacy workers, and flat owners coop personnel were the most productive key informants in 2002 for identifying sites where syringes were lying on the ground and IDUs, flat owners coop personnel, and police officers were most productive for identifying these types of sites during the 2003 study.

## Step 3: What Are the Characteristics of Sites Where People Meet New Sexual Partners and/or Injection Drug Users Socialize? Findings from Interviews at Sites

#### A. Objectives

The objectives of Step 3 are to verify the existence of sites reported by key informants and describe the characteristics of these sites and of the people who socialize at them.

#### B. Methods

In this phase of the fieldwork, interviewers visited sites reported by key informants and interviewed a site representative who was knowledgeable about the site (such as the site manager or owner) to obtain characteristics of the site important for AIDS prevention. The questions did not require knowledge of the business operations at the site. If no one was available for interview during the first visit, the site was re-visited. The criteria for identifying a suitable respondent were broad to prevent deductive disclosure of identity and to limit the number of re-visits. Verbal consent for an anonymous interview was obtained for each completed interview. Respondents were asked about the following:

- Name of the site and number of years in operation
- Types of activities occurring on site
- Estimated number of clients at peak times
- Patron characteristics including age, gender, residence, and employment status
- Whether people meet new sexual partners at the site
- Whether CSWs solicit customers at the site
- Whether IDUs socialize at the site or used syringes can be found
- Extent of AIDS/STD prevention activities onsite including condoms and posters
- Willingness to sell condoms.

Teams of 2-3 interviewers were assigned to each unit of the city and given a list of sites in the unit. The criteria for determining which sites to verify were developed. Exclusion criteria were developed due to the vast number of sites reported which made it not feasible to visit every site named by key informants. In addition, we expected that little benefit would be gained by visiting sites such as stairwells and rooftops mentioned by very few people. These sites are unlikely candidates for outreach efforts.

In 2002, all sites mentioned two or more times by key informants were verified. Sites named by only one key informant were also verified unless they were a private flat, basement, roof, stairwell, entire street block, or site that was not identified as a priority site for people meeting new sexual partners, injection drug use, or commercial sex.

In 2003, all sites named two or more times by key informants were verified. Sites mentioned only one time were excluded from verification. Sites that were identified as overlap sites during the 2002 study that were not named by key informants during the 2003 assessment or did not satisfy the above

selection criteria for verification were added to the list of sites for verification. Overlap sites were defined in 2002 as sites where people meet new sexual partners, commercial sex workers solicit clients, injection drug users socialize, and at least some youth are present. These overlap sites were included in 2003 so that the activities and behaviors at these sites can be monitored over time.

Maps of sites were produced for both the 2002 and 2003 assessments. All verified sites were identified using coordinates obtained by a Global Positioning System (GPS) unit.

#### C. Results

During the 2002 study, site verification was completed in eight days by 24 interviewers (Table 2). During the 2003 study, 23 interviewers completed site verification in five days.

Many sites reported by kev informants were not verified because they did not meet the criteria for being visited, e.g., only one person mentioned the site and it was a stairwell or roof. In 2002, 22% of sites were excluded from verification and in 2003, 43% of sites were excluded. An additional 44 priority sites from the 2002 assessment were also selected for verification in 2003.

Table 2. Summary of site verification field work

·	2002	2003
Days of Site Verification	8	5
Number of Interviewers	24	23
<b>Outcome of Site Verification Visits</b>		
Number of Sites Selected for Site Verification	502	363
Site Found and Person Interviewed	443	328
Site Found and Person Refused Interview	59	2
Site Not Found: Insufficient or Incorrect Address	**	3
Site Temporarily Closed	**	13
Site Permanently Closed	**	4
Duplicate Site	**	13
Sites Excluded from Verification	143	195
Total	645	556

<sup>\*\*</sup>Incomplete recording of information about sites that were closed, not found, or duplicates in 2002

During the 2002 study, approximately 12% of site representatives declined an interview. During the 2003 assessment, less than 1% of site representative declined an interview. Additionally, 1% of sites selected for site verification could not be found due to an insufficient or incorrect address, 4% of sites were temporarily closed, 1% were permanently closed, and 4% of sites were duplicates of sites already verified. At total of 328 sites were verified during the 2003 study, 90% of sites that were selected for verification.

The remainder of this section of the report describes the sites that were visited and verified.

#### Site Types and Non-sex Activities at Sites

The most common types of sites named as places where people meet new sexual partners and/or IDUs socialize were bars, cafés, and restaurants, but basements, roofs, stairwells, unused and abandoned buildings, and streets were also frequently named (Figure 8). Over 60% of sites in 2002 and 2003 had been in operation for more than two years including almost one fifth that had been in operation for over ten years. Most sites reported being busy every night of the week with Friday and Saturday as their busiest nights. Winter was the least busy season.

100 **■** Other 90 80 □ Parks/Markets 70 **■** Streets/Transportation Stop 60 Percent **■** School/University **50** 40 ☐ Roof/Stairwell/Abandoned 30 **□** Dorm/Apartment 20 **■** Nightclub 10 0 ■ Bar/Café/Restaurant 2002 (N=443) 2003 (N=328)

Figure 8. Type of site.

The sites visited for site verification interviews during the 2002 and 2003 assessments had similar distributions of onsite activities (Figure 9). Beer and/or hard alcohol were consumed at the majority of sites. Other popular activities at these sites include eating food and listening to music. Approximately one third of the sites had dancing.

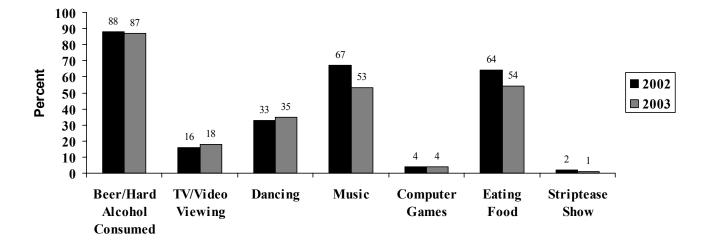


Figure 9. On-site activities.

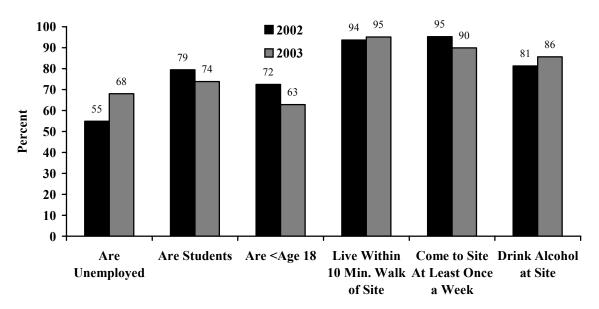
#### Characteristics of Site Patrons

A high proportion of sites during both 2002 and 2003 have at least some patrons who live within a ten minute walk of the sites, visit the site at least once a week, and drink alcohol while at the site (Figure 10). Men and women who visit the sites have similar characteristics and the patron profiles in 2002 and 2003 were similar.

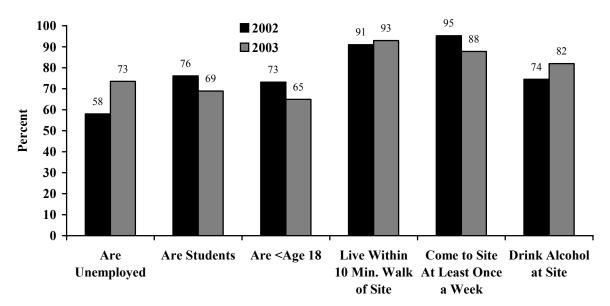
During the 2003 study, site representatives were asked about how patrons came to the sties. Approximately three quarters of sites had at least some patrons who came to the site by private car or taxi and at least some patrons who came by public transportation.

Figure 10. Characteristics of site patrons.

Proportion of sites with at least some male patrons who...



Proportion of sites with at least some female patrons who...



#### Sexual Partnerships

A knowledgeable person at each site was asked whether men and women meet new sexual partners at the site. The responses were often in the affirmative. The proportion of sites where men meet new female sexual partners was 60% in 2002 and 65% in 2003 (Figure 11). Gay partnerships were reported infrequently at approximately 7% of sites. The proportion of site of sites were commercial sex workers solicited customers increased from 25% of sites in 2002 to 44% in 2003. At less than 10% of sites, someone at the site helps facilitate partnerships. During the 2003 assessment, site staff reported meeting new sexual partners at 18% of sites.

Men meet Women Sex workers solicit Men meet men

Figure 11. Sexual partnership formation and IDUs socializing at sites.

#### Injection Drug Use

The perception of drug use in the area increased from 2002 to 2003. Over half of the respondents in 2002 and almost three quarters in 2003 thought that injection drug use in the area was very common or somewhat common (Figure 12). Approximately 10% of respondents thought that injection does not occur in the area.

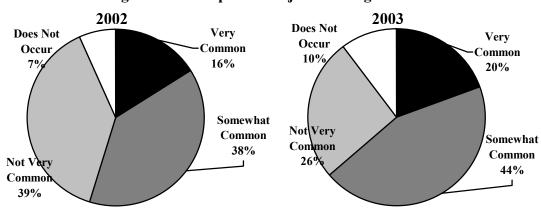


Figure 12. Perception of injection drug use in area.

This perception that drug use was common in the area and increased from 2002 to 2003 was also apparent in other site characteristics related to injection drug use. Approximately half of respondents in 2002 and almost two thirds in 2003 reported that injection drug users could be found at their site (Figure 13). Furthermore, of those who replied that IDUs could be found socializing at their site, the majority responded that the site had been a place where drug injectors could be found for at least one year prior to the interview and often longer. Evidence of injection drug use in or around the sites was visible. The proportion of respondents who reported seeing used syringes lying around inside or outside the site in the past three months increased slightly from 37% in 2002 to 42% in 2003. Interviewers also reported similar evidence of injection drug use. Used syringes were observed by interviewers at approximately 9% sites in 2002 and 13% of sites in 2003.

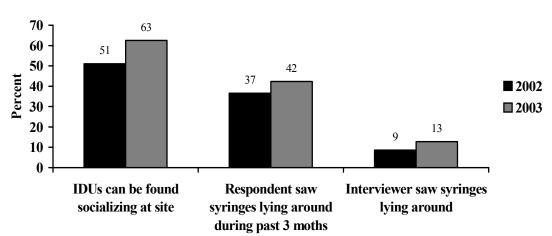


Figure 13. Injection drug use around sites.

#### Overlap of High-Risk Populations at Sites

Site respondents reported considerable overlap between high-risk groups during both the 2002 and 2003 assessments (Figure 14). The proportion of sites where sex workers solicit clients and injection drug users socialized doubled from 15% in 2002 to 34% in 2003. Similarly, the proportion of sites where people meet new partners and sex workers solicit clients increased from 22% in 2002 to 44% in 2003. At 14% of sites in 2002 and 34% of sites in 2003, respondents reported that people meet new sexual partners at the site *and* commercial sex workers solicit clients *and* IDUs social at the site.

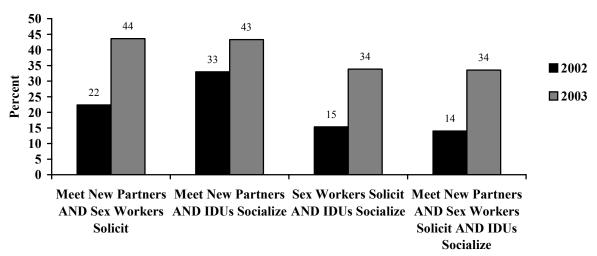


Figure 14. Overlap of high risk populations at sites.

#### AIDS Prevention Activities

Site-based AIDS prevention activities were rare (Figure 15). The proportion of sites that ever had an HIV/AIDS prevention activity at the site was 6% in 2002 and 10% in 2003. During the 2003 assessment, sites respondents were asked about the type of prevention activities at the site. Approximately 2% of sites had lectures and seminars and 6% had pamphlets and leaflets, or posters. Distribution of condoms occurred at less than 5% of sites and distribution of syringes at 3% of sites. During the 2002 and 2003 assessments, AIDS posters were displayed and AIDS brochures were available at less than 5% of sites. During the 2002 assessment, approximately 58% of site respondents

said that they were willing to have an AIDS prevention program at the site. During the 2003 assessment, a person who had authority to talk to intervention groups on behalf of the site, such as a manager or owner, was identified at each site and asked if he or she was willing to talk to a person from a local AIDS prevention program about including the site in a new AIDS prevention program in the area. Such a person was identified at 121 of the verified sites and 47% of these individuals were willing to talk to local intervention groups about having an AIDS prevention program at the site.

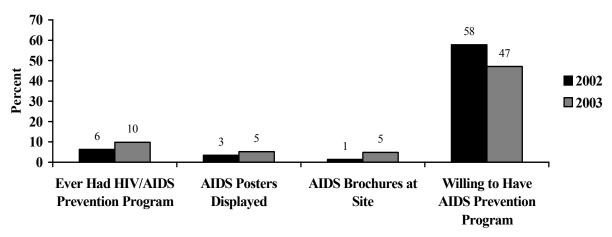


Figure 15. AIDS educational activities at the sites.

Condom availability increased significantly between the 2002 and 2003 assessments (Figure 16). During the 2002 study, 61% of sites never had condoms available in the last 12 months, three quarters of sites did not have condoms available on the day of the site verification interview, and 82% of sites did not have condoms visible at the site. However, at 92% of sites, it was possible for someone to find a condom within ten minutes of leaving the site at night. During the 2003 assessment, condoms were more likely to have been available at sites during the past 12 months, to be available on the day of the interview, and to be visible compared to the 2002 assessment. Condoms were always available in the past 12 months at 38% of sites included in the 2003 study compared to only 25% of sites in the 2002 study. Interviewers asked to see and saw a condom at twice as many sites during the 2003 assessment compared to the 2002 assessment (36% vs. 19% respectively). Multiple brands of condoms were often available. The brands most often available at study sites during the 2003 study were Desire (14%), Durex (14%), and Favorite (14%). The proportion of site representatives willing to sell condoms at their site increased from 52% in 2002 to 52% in 2003.

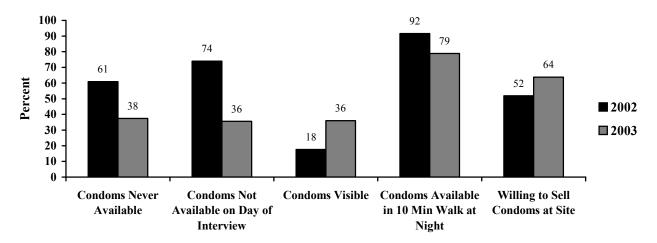


Figure 16. Condom availability at sites.

There were 163 sites where site verification interviews were performed in 2002 and 2003. There was no difference in the reported behaviors at these sites from 2002 to 2003 except an increase in the proportion of site where people meet new sexual partners, which increased from 67% in 2002 to 73% in 2003.

# Step 4: What Are the Characteristics of People Who Socialize at Sites Where People Meet New Sexual Partners and/or Injection Drug Users Socialize? Findings from Interviews with People Socializing at Sites

#### A. Objective

The objective of this step is to describe the characteristics and behaviors of individuals socializing at the sites. The sampling strategy was designed to provide estimates of a representative sample of people socializing at sites. In addition, because of the importance of describing the characteristics of injecting drug users, additional samples of injection drug users were interviewed as necessary to achieve a sufficient number of such respondents.

#### B. Methods

A sample of verified sites was selected and a sample of individuals socializing at these sites was interviewed. This step is the only one in which self-reported information was gathered from interviewees.

#### 1. Selecting sites where socializing individuals were interviewed

A sample of sites was selected at which to perform interviews with socializing individuals. The objective of the sampling strategy was to obtain a sufficiently precise estimate of the proportion of individuals socializing at the sites who reported meeting a new sexual partner at the site or who inject drugs. The final selection of sites could only occur after the key informant interviews and site visits were conducted. The resulting list of reported sites was compiled into a sampling frame.

A four step process was used to select sites for individual interviews.

- First, a target number of interviews to be performed was selected such that it exceeded the minimum requirement to obtain precise estimates of the key variables and assured that 200 IDUs and 200 commercial sex workers would be interviewed in the process. In 2002, a target number of 7,150 interviews were selected and in 2003, the target number of interviews was 1,000.
- Next, a strategy for selecting the number of people to be interviewed at each site was determined according to site size. Ten people were interviewed at small sites (<20 men socializing at a busy day (2002) or busy time (2003)), 20 people at medium-sized sites (20 to 49 men socializing at a busy day (2002) or busy time (2003)), and 30 people at large sites (50 or more men socializing at a busy day (2002) or busy time (2003)).</p>
- Next, a random sample of sites was selected for individual interviews from the list of verified sites.
- Finally, the list of randomly selected sites was reviewed and a supplemental list of sites was identified from the list of those not selected. The supplemental sites were those sites mentioned by

15 or more key informants that were not included in the random sample. These sites were considered important potential intervention sites.

This process permits estimates of a representative sample of the entire population of people who socialize at sites as well as estimates of the characteristics of people socializing at the sites that may be the most important to reach in an intervention program.

#### 2. Sampling individuals at selected sites

Interviewers visited sites in teams of two at peak times, which most often was during the evening or night. When sites were deemed unsafe at their peak times (such as certain bars or streets), interviewers completed the field work earlier in the day to maintain safe working conditions. To identify systematically potential respondents, interviewers followed three principles: 1) they did not ask more than one individual in each group socializing together; 2) they numbered the individuals at a site and identified potential interviewees using intervals; and, 3) they made sure to interview individuals at different locations within a site. When approaching an individual, the interviewer explained the purpose of the study and the types of questions that would be asked and requested verbal informed consent before proceeding with the interview. It was often necessary to request that the respondent move to a different location at the site, away from their peers and others at the site, to preserve privacy and encourage truthful responses. There was no quota for the numbers of interviews to be performed with men and women.

When the target number of interviews with IDUs was not met by randomly approaching individuals at sites as described above, this target group was sought by re-visiting sites where IDUs had previously been found.

#### C. Results

Interviews with socializing individuals occurred at slightly less than a quarter of the sites in 2002 and 2003 (Table 3). The target number of interviews was achieved each year but oversampling of IDUs was necessary in 2002.

The results for the four populations of interest are reported separately. The representative sample includes the random sample individuals interviewed at

Table 3. Summary of individuals interviews field work

	2002		2003	
Number of Sites Visited for Individual Interviews	107		68	
Percent of Verified Sites Visited for Individual Interviews	24.2%		21.3%	
Number of Days of Interviews	11		8	
Number of Interviewers	28		20	
<b>Number Interviewed</b>	M	$\mathbf{F}$	M	F
Number of People Approached for Interview	*	*	586	579
Number of Refusals	*	*	76	89
Completed Interviews				
Representative Sample	897	752	510	490
Youth	440	471	253	297
CSW and Clients	283	280	140	200
IDUs	225	63	182	36

<sup>\*</sup>Incomplete recording of refusals in 2002

each site, that is, all interviewed individuals except for the IDUs who were oversampled at a later date. This sample is representative of the socializing population at sites where individual interviews were performed. However, not all sites were verified. The results of three sub populations, youth, CSWs and clients, and IDUs, are also presented separately. The youth population is a representative sample

of all individuals aged 25 years and younger socializing at the sites. CSWs were defined as women who had received money in exchange for sex during the past three months. Clients of CSWs were defined as men who had given money in exchange for sex during the past three months. The IDU population included all individuals who reported injecting drugs during the past six months who were interviewed as part of the representative sample plus, in 2002, those individuals who were oversampled to achieve the target numbers of interviews in this population.

#### Part 1: Representative Sample of People Socializing at the Sites

#### Socio-demographic Characteristics

Slightly over half of the individuals interviewed in the representative sample each year were male. Socio-demographic characteristics of men and women socializing at sites did not change substantially between 2002 and 2003. On average, male and female patrons were approximately the same age. In 2002 the average age of men in the representative sample was 27 years and in 2003, 28 years. For women, the average age was 26 years in 2002 in 2003.

There were no differences in residence, nights spent outside the city, or educational attainment for men and women. Over 90% of men and women interviewed were residents of the city and almost 60% had lived in the city all of their life (Figure 17). Approximately two-fifths of men and women had spent at least one night outside of the city in the past three months. Many patrons lived near the site where they were interviewed with 46% of men and 41% of women living within a 10 minute walk of the site. About a fifth of the socializing population had at least some high education and approximately two fifths were students.

Men socializing at the sites were more likely than women to be married and employed. Approximately 42% of men socializing at sites were married compared to a third of women. Men were also more likely than women to be employed with 51% employed fulltime compared to 36% of women who were employed fulltime.

There were no substantial differences in the characteristics of men and women socializing in 2002 compared to those socializing in 2003.

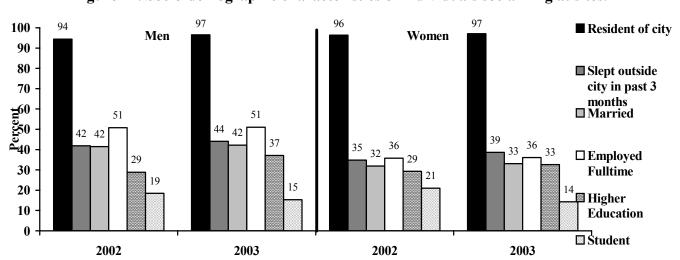


Figure 17. Socio-demographic characteristics of individuals socializing at sites.

#### Interviewer Opinion of Respondent

Before beginning each interview, the interviewer recorded his/her opinion about whether the respondent was a CSW or an IDU. The proportion of men thought to be IDUs increased from 2002 to 2003 and the proportion of women thought to be CSWs also increased during this time period. Interviewers were more likely to identify men as potential IDUs than women with 24% of male respondents in 2002 and 40% in 2003 who were believed to be IDUs (Figure 18). Among women, 34% in 2002 and 43% in 2003 were believed to be a CSW. Approximately 5% of women were thought to be both a CSW and an IDU but the majority of respondents were thought to be neither a CSW nor an IDU. Interviewer opinion of the respondent agreed closely with the self-reported data provided by the respondent later in the interview.

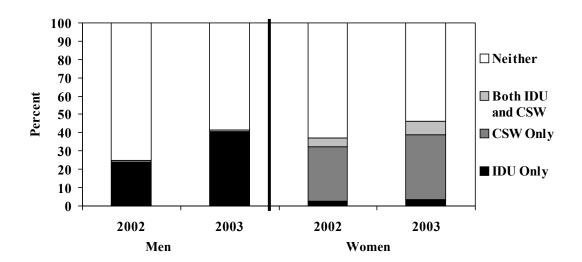


Figure 18. Interviewer opinion of respondent.

#### <u>Site Visitatio</u>n

Many people visit the site regularly. The frequency of attendance at sites did not vary significantly by gender or by year (Figure 19). Just over a quarter of respondents visited daily the site at which they were interviewed. On average, men visited the site 3.4 times during the past seven days and women 3.7 times during the same time period. Almost three quarters of men and approximately two thirds of women first visited the site where they were interviewed over one year ago indicating that these sites have well established, loyal patronage.

Over half of those interviewed walked to the site while approximately 20% came to the site via public transportation and the remaining 20% came to the site by car.

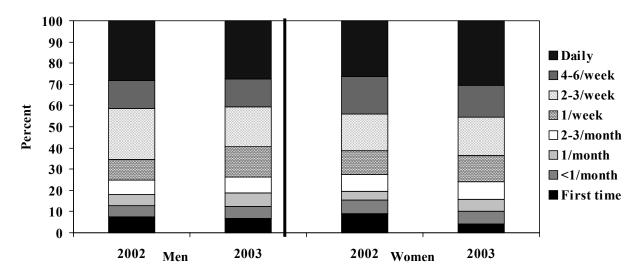


Figure 19. Frequency of attendance at sites by gender and year.

#### Reason for Site Visit

The majority of socializing individuals (84% of men and 66% of women) came to the site on the day of the interview to socialize with friends. Over 40% of men and a third of women reported that they came to the site to drink alcohol. Women were twice as likely as men to report coming to the site to meet a new sexual partner (42% vs. 22%).

#### New Partnership Formation at Sites

The proportion of socializing individuals believed that people came to the interview site to meet a new sexual partner was high, ranging from 69% of men in 2002 to 78% of women in 2003 (Figure 20). Approximately 30% of respondents in 2002 and a quarter in 2003 reported that they had personally met a new sexual partner at the site.

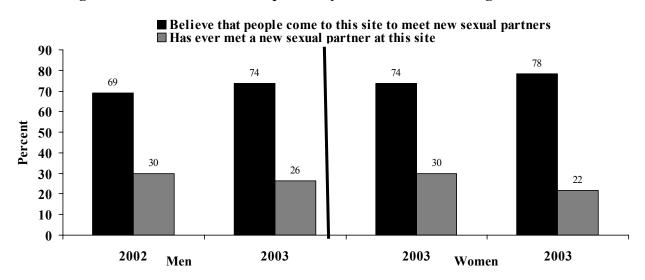


Figure 20. Partner selection reported by individuals socializing at the sites.

When the individual last attracted a new sexual partner at the site ranged from within the past 24 hours to over a year ago. Women were more likely to have attracted their last new sexual partner from the site within the past seven days while men tended to have attracted their last new partner from the site over a longer time period. This higher proportion of women who recently met a new sexual partner at the site is likely due to commercial sex workers who were included as part of the representative sample.

Among individuals who ever met a new sexual partner at the interview site, men were less likely than women to have used a condom with the last new partner they met at the site but condom use with new partners from the sites increased for both men and women between 2002 and 2003. Approximately 47% of men in 2002 and 58% in 2003 reported using a condom with the last new partner they met at the site compared to 75% of women in 2002 and 81% of women in 2003.

In 2002, among men who ever met a new sexual partner at the site, a higher proportion reported using a condom with the last new partner at interview sites where condoms were always available during the past year compared to sites where condoms were never available (Figure 21). However, in 2003, the reverse was observed and a higher proportion of men reported using a condom with their last new partner from sites where condoms were never available compared to sites where they were always available.

Condom availability at sites did not appear to influence whether women who met a new partner at the site used a condom with the last new partner at the. In 2002 and 2003, similar proportions of women interviewed at sites with condoms always available and at sites with condoms never available used a condom with their last new partner from the site.

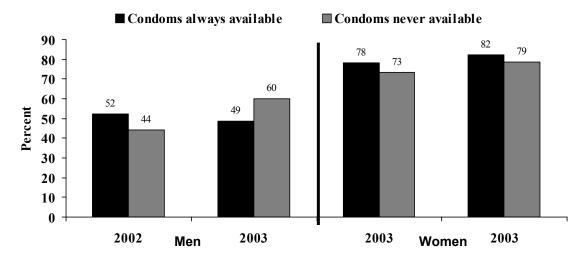
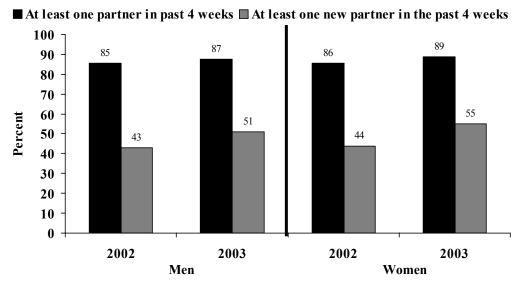


Figure 21. Condom use with last new partner met at site by condom availability at site.

#### Number of Sexual Partners

Partner acquisition rates did not vary by gender. Over 85% of men and women reported at least one partner in the past four weeks. The proportion who reported at least one new partner during this time period increased slightly from 2002 to 2003. In 2002, 43% of men and 44% of women reported a new partner in the past four weeks and in 2003, 51% of men and 55% of women reported a new partner during this time.

Figure 22. Proportion of individuals socializing at sites with at least one partner during the past four weeks by gender.

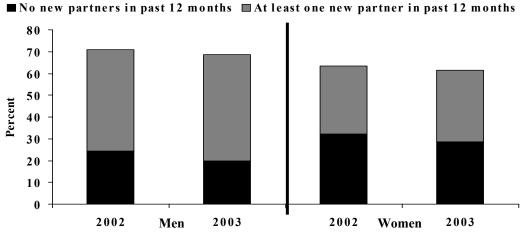


During the previous 12 months, over 90% of men and women reported at least one sexual partner. While the number of total partners did not differ substantially, men were more likely to have had at least one new partner during this period compared to women. Among men with at least one partner in the previous 12 months, over three quarters had at least one new partner in the 12 months. Among women with at least one partner in the previous 12 months, approximately two thirds had at least one new partner in the past 12 months.

#### Regular Sexual Partnerships

Approximately 70% of men interviewed and over 60% of women reported having a regular long-term sexual partner, that is, someone they had been having sex with at least monthly for a year or more (Figure 23). However, in addition to their long-term regular partner, many individuals also reported at least one new partner during the previous 12 months. Approximately two thirds of men and over half of women who reported a regular long-term partner also reported at least one new partner during the previous 12 months.

Figure 23. Proportion of individuals with a regular, long-term sexual partner.



#### Age Difference among Partners

In 2003, individuals were asked the age of the youngest and oldest person that they had had sex with in the past 12 months. Men, on average, tended to have partners younger than themselves while women were more likely to have older partners (Figure 24). Among men, the average age for the youngest partner was 6.0 years younger and the average for older partners was 0.6 years older. Women were, on average, 1.0 years older than their youngest partner and their oldest partner was, on average, 12.3 years older including 46% of respondents who had a partner 10 or more years older.

Youngest Partner is ...

10+ years older
5 to 9 years older
Same age
1 to 4 years younger
5 to 9 years younger
10+ years younger
5 to 9 years younger
5 to 9 years younger
10+ years younger
10+ years younger

Fercent

50 40 30 20 10 0 10 20 30 40 50

Percent

Figure 24. Age difference between respondent and youngest/oldest partner in past 12 months.

#### Transactional Sex

The proportion of men who reported transactional sex during the past three months was 28% in 2002 to 32% in 2003 (Figure 25). The proportion of women who had received money in exchange for sex increased from 28% in 2002 to 41% in 2003.

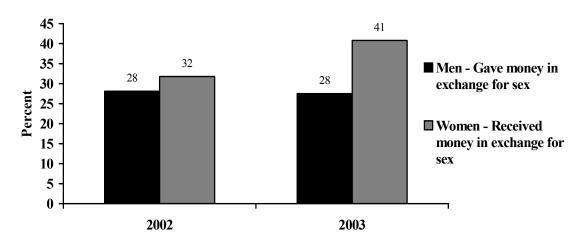


Figure 25. Transactional sex.

#### Gay Sex

Men rarely reported having sex with another man. In 2002, 1% of men interviewed reported having sex with another man in the past four weeks. In 2003, 4% of men reported having sex with another man in the past four weeks.

## Self-Reported Condom Use

Condom use was relatively high among individuals socializing at the sites and comparable levels of use were reported in 2002 and 2003. Approximately 85% of men and three quarters of women had ever used a condom. Women were more likely than men to have last used a condom in the past 24 hours with approximately 17% of women doing so compared to 10% of men. However, condom use in the past week was not substantially different between men and women.

Among patrons who had a new partner in the last four weeks, approximately two thirds of men and 80% of women reported using a condom with their last new partner in the past four weeks (Figure 26). When asked how often in the past four weeks they used condoms with new sexual partners, the proportions were slightly lower. Among men, 46% reported always using a condom with new sexual partners in the past four weeks, 38% reported that they sometimes used a condom with new partners, and 16% reported that they never did. Among women, 57% reported always using a condom with new sexual partners in the past four weeks, 37% sometimes did, and 6% never used a condom.

Among men who did not use a condom with their last new partner in the past four weeks, the most common reasons for not using one were that they did not like condoms (48%) and they did not have condoms at hand (44%). The most common reason among women for not using a condom with their last new partner in the past four weeks was that their partner protested (31%).

Condom use at last sex with a regular partner was lower than use with new partners for both men and women. Among those with a regular partner, approximately one third reported using a condom at last sex with a regular partner.

#### <u>Perceived Condom Effectiveness</u>

Among those who use condoms and had a partner in the past 12 months, 19% of men and 30% of women reported that they had had a condom break during this time period. Approximately 40% of respondents reported that they thought condoms were very effective in preventing STIs including HIV and a third thought that they were somewhat effective. Approximately 15% thought that they were not very effective but less than 3% thought that they were not effective at all. Approximately 5% did not know whether or not they were effective. On average, men thought that a reasonable price for a condom should be 38 tenge and women, 31 tenge.

#### Condom Availability

The proportion of men and women who had a condom with them at the time of interview increased from 2002 to 2003. In 2002, 14% of men had a condom with them at the time of interview and a condom was seen by 10% of interviewers. In 2003, 30% of men had a condom and 27% of interviewers saw one. Similarly, among women in 2002, 22% of women had a condom and 16% of interviewers saw one whereas in 2003, 33% of women had a condom and 31% of interviewers saw

one. Durex was the most commonly seen brand of condom. Among those who had a condom with them, 22% of men and 31% of women had a Durex brand condom.

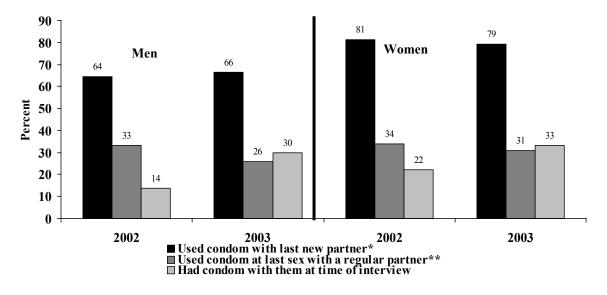


Figure 26. Condom use by gender.

Pharmacies and kiosks were most frequently named by men as the place where they obtained their last condom (Figure 27). Women reported obtaining their last condom from either their partner or from a pharmacy.

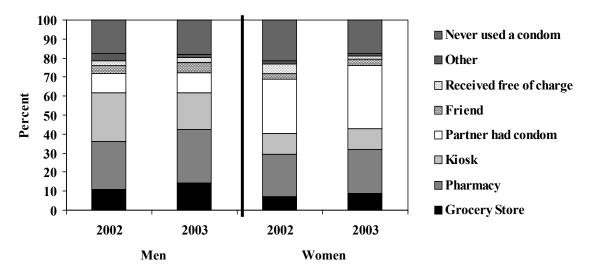


Figure 27. Location where last condom used was obtained.

Among those who had ever used a condom, Durex was most commonly reported (13% of men and 12% of women) as the last brand of condom used. However, 34% of men and 39% of women did not remember or know the brand of the last condom used.

<sup>\*</sup>Among individuals with at least one new partner in past four weeks

<sup>\*\*</sup>Among individuals with a regular partner

# Exposure to HIV/AIDS Education

In 2002, 9% of men and 12% of women had attended an AIDS education session in the past 12 months. In 2003, individuals socializing at sites were asked if they had heard or seen any information about HIV/AIDS in the past 12 months and 83% of men and 93% of women responded in the affirmative. Television was the most frequently reported source from which this information was received with over 70% of the population having done so. Other commonly reported sources included newspapers, magazines, leaflets, and posters. Approximately 30% to 40% of men and 43% to 47% of women also reported hearing or receiving information about HIV/AIDS on the radio, from a friend or relative, and/or from a doctor or health care worker.

# Opinion about HIV/AIDS as a Problem in Karaganda

In 2003, respondents were asked whether they perceived HIV/AIDS as a problem in Karaganda. Approximately 80% of men and women interviewed thought that HIV/AIDS was a serious problem in Karaganda (Figure 28). Less than 2% thought that it was not a problem at all in the city.

Men Women Not a Not a Do Not Know Do Not Know Problem at Problem at All All Somewhat of Somewhat of a Problem a Problem Serious Serious Problem Problem

Figure 28. Opinion of HIV/AIDS as a problem in Karaganda.

#### Knowledge of HIV/AIDS

Individuals socializing at sites were asked about their knowledge of HIV/AIDS transmission and prevention. There was no difference in knowledge between men and women. Almost all (>97%) respondents knew that HIV could be transmitted by sexual contact without a condom and by injecting drugs with a shared syringe. The proportion of men and women who knew that HIV could not be spread by eating form a common dish, swimming in a common pool, through an insect bit, or by a handshake increased from 2002 to 2003. However, many respondents were still unsure whether HIV could be spread through these routes.

The distribution of the number of questions answered correctly by each individual increased from 2002 to 2003. The mean number of questions answered correctly by men increased from 4.6 to 5.2 and by women from 4.6 to 5.0. Approximately 54% of men and 46% of women answered all six questions correctly in 2003.

Although the majority of individuals knew that it was possible to become infected with HIV through sexual contact without a condom and by injecting drugs with a shared syringe, fewer people responded that using condoms or avoiding sharing needles were ways that people could avoid or reduce their chances of becoming infected with HIV. Approximately 80% responded that people can avoid or reduce their chances of becoming infected with HIV by using condoms and 60% responded that avoiding sharing needles will avoid or reduce the chance of becoming infected. The majority of individuals named two or three ways that a person could avoid or reduce their chance of getting HIV.

Between 70% and 80% of men and women each year responded that a person who looks healthy can be infected with HIV. Approximately 12% to 20% responded that they did not know.

## Perception of Personal Risk for HIV Infection

In 2003, respondents were asked their opinion of their personal risk of contracting the HIV/AIDS virus. Approximately 17% of men and 16% of women thought that they were very likely to contract the HIV/AIDS virus and 20% of men and 22% of women thought that they were at no risk at all for contracting the virus (Figure 29). Approximately 11% of men and women were not sure of their risk.

Men Women Do Not Do Not Very Very Know Know Likely Likely No Risk No Risk Somewhat Somewhat Likely Likely Not Very Not Very Likely Likely

Figure 29. Perception of likelihood of contracting the HIV/AIDS virus.

#### **HIV Testing**

Approximately 40% of men and women had been tested for HIV in the past 12 months. Among men tested in 2002, testing was slightly more likely to be voluntary than obligatory and in 2003 the reverse. Among women tested, two-thirds of women tested each year were tested voluntarily. Among those who were tested for HIV in 2003, 57% of men and 67% of women reported that they had received counseling about the ways of transmission and other HIV/AIDS related information.

Almost two thirds of respondents in 2003 reported that they would be interesting in getting an HIV test voluntarily. In 2003, respondents were also asked if they knew where in Karaganda a person could receive an HIV test. The most frequently named places were a hospital or clinic with 61% of men and

59% of women responding as such and the Center for AIDS with 56% of men and 58% of women responding as such. The next most frequently named place was a venerological or dermatological center named by 36% of men and 38% of women. Approximately 5% of men and women did not know where a person could get an HIV test.

# Opinion about Injection Drug Use in the Unit of the City Where Interview Occurred

Respondents were asked about injecting drug use in the area as well as their own drug use behavior. The respondents' opinion about drug use in the area increased substantially between 2002 and 2003 (Figure 30). In 2002, approximately 10% of respondents thought that injection drug use was very common in the unit of the city in which they were interviewed and in 2003 this proportion had quadrupled to 45% of men and 39% of women. Approximately 3% of respondents reported that injection drug use did not occur in the unit and the proportion did not know whether or not injection drug use occurred in the unit decreased from over two-fifths in 2002 to approximately 10% in 2003.

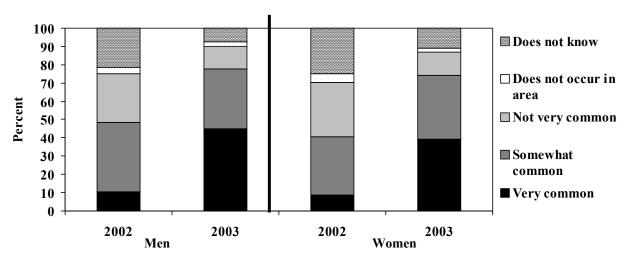


Figure 30. Respondents' opinion of injecting drug use in city unit of interview.

Opinion Whether Injection Drug Users Socialize at the Site

The proportion of respondents who thought that injection drug users socialized at the site increased from 58% of men in 2002 to 73% of men in 2003 and from 56% of women in 2002 to 68% in 2003 (Figure 31). Less than 10% thought that injection drug users did not socialize at the site and the remainder was not sure if IDUs did or not.

# Self-Reported Injection Drug Use

Injection drug use was reported more frequently by men than by women and increased among men between 2002 and 2003 but remained constant among women during this period. In 2002, 27% of men reported that they had ever injected drugs compared to 42% of men in 2003 and approximately 12% of women in 2002 and 2003 reported ever injecting drugs. Among those who reported ever injecting drugs, the proportion of men who had injected in the past six months increased from three-quarters to over 85%. Among women who had ever injected, this proportion increased modestly from half to 61%.

Approximately 15% to 20% of men and 5% to 7% of women reported ever having been arrested for injecting drugs. Approximately 20% of men and 6% of women had ever met with a narcologist.

Approximately 39% of men and almost one third of women had heard of a place in the city where IDUs can get new syringes.

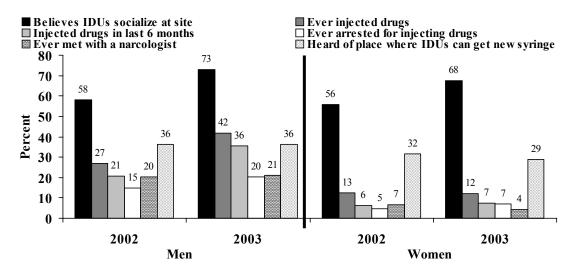


Figure 31. Injecting drug use behavior by individuals socializing at sites.

## **Contact with Treatment Facilities**

In 2002, the majority of men (91%) and women (95%) had ever visited a state medical clinic. Contact with private medical clinics was not as common with a third of men and 45% of women having ever visited a private clinic. Half of men and 63% of women had ever been to an emergency clinic. Approximately quarter of men and women had ever visited an infection hospital or a skin or venerological dispensary. Two-fifths of men and 13% of women had visited a TB dispensary. Less than 10% of respondents had ever visited a trust point, or talked with a private vernerological or narcological doctor, or talked to an outreach or social worker about injection drug use.

#### Knowledge of STI Symptoms

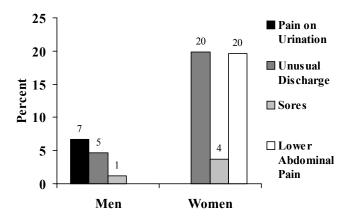
In 2003, over 95% of men and women reported that they had heard of diseases or infections that could be transmitted through sexual intercourse. When asked to name signs or symptoms that indicate that someone has a sexually transmitted disease or infection, the most commonly named signs and symptoms by men were discharge from penis (68%), genital ulcers or open sores (43%), burning pain on urination (38%), and itching in genital area (36%). The most commonly named signs and symptoms by women were discharge from vagina (73%), genital ulcers or open sores (57%), itching in genital area (50%), and lower abdominal pain (39%). Approximately 5% of men women did not know any signs or symptoms which indicate that someone has a sexually transmitted disease or infection.

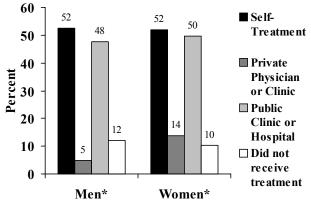
# Self-Reported STI Symptoms

In 2003, 8% of men and 27% of women reported that they had experienced STI symptoms in the past four weeks (Figure 32). The most commonly reported symptom among men was pain on urination (6%) and among women, unusual discharge (20%) and lower abdominal pain (20%). Among those

who had symptoms, approximately half of the respondents self-treated and approximately half went to a public clinic or hospital. Men and women infrequently sought treatment from public clinics or hospitals. Approximately 12% of men and 10% of women did not receive treatment for their symptoms.

Figure 32. STI symptoms and treatment.





\*Among the 8% of men and 27% of women with any symptoms in past 4 weeks.

#### Part 2: Results from Interviews with Youth

Youth, aged 18 to 25 years, included as part of the representative sample, were also examined as a separate group. Half of men and over 60% of women interviewed as part of the representative sample were youth (Figure 33). Women socializing at the sites tended to be younger than male patrons and this difference in age is reflected in the higher proportion of female youth compared to male youth in the representative sample.

70 63 61 60 50 49 **50** 40 ■ Male Youth ■ Female Youth **30** 20 10 0 2002 2003

Figure 33. Proportion of youth in the representative sample of individuals socializing at the sites.

#### Youth: Socio-demographic Characteristics

Youth were not significantly different from the representative sample of patrons in terms of current residence, distance that they lived from site, and nights slept outside the city during the past three months. Youth were less likely to be married or employed full time compared to representative sample and more likely to have lived in the city their entire life be students and have lower educational attainment (probably a factor of age and student status).

Youth in the 2002 sample were similar to the 2003 sample (Figure 34). Most were residents of the city and had lived there their entire life. Male youth were slightly more likely to be married, employed full time, and have at least some higher education.

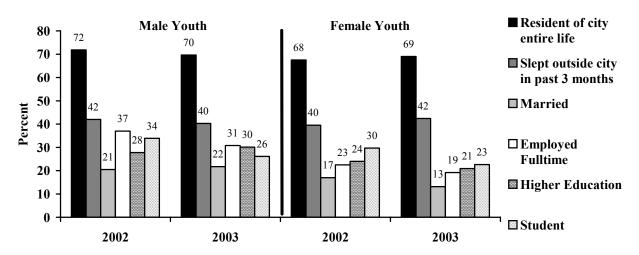


Figure 34. Socio-demographic characteristics of youth socializing at sites.

#### Youth: Interviewer Opinion of Respondent

Male youth in 2003 were slightly more likely than men in the representative sample and substantially more likely than male youth in 2002 to be identified by the interviewer as an IDU. A quarter of male youth in 2002 were thought by then interviewer to be an IDU where as half were though of as such in 2003. In 2002 and 2003, female youth were slightly more likely to be identified by the interviewer as a CSW than women in the representative sample. Furthermore, female youth were more likely to be identified as a CSW in 2003 (57%) than in 2002 (41%) (Figure 35). Only 38% of female youth in 2003 were thought to be neither a CSW or an IDU or both.

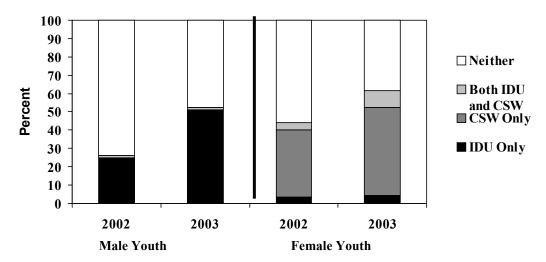


Figure 35. Interviewer opinion of youth socializing at sites.

# Youth: Site Visitation

The frequency of attendance at sites by youth is almost identical to the pattern of the representative sample and does not vary substantially by gender. On average, male and female youth visited the site 3.7 times during the past seven days. Approximately 30% of youth visit the sites daily and over two thirds first visited the site over one year ago.

Three quarters of male youth walked to the site, 20% came via public transportation, and 13% by car. Among female youth, 54% walked to the site, 27% came via public transportation, and 20% by car.

#### Youth: Reason for Site Visit

Youth visited the sites for the same reasons as individual in the representative sample. The majority of youth came to the site to socialize with friends (91% of male youth and 70% of female youth). Female youth were more likely to report coming to the site to meet a new partner (56%) than to drink alcohol (36%) whereas the reverse was true for male youth (25% and 43%, respectively). Female youth were more likely to come to the site to meet a new sexual partner than women in the representative sample.

## Youth: New Partnership Formation at Sites

Youth in 2003 were more likely to believe people meet new partners at the sites, have themselves met a new partner at the site, and to have met a partner at the site in the past four weeks than youth in 2002

and than older individuals (Figure 36). Female youth were slightly more likely to have met a new partner at the site and to have recently attracted a new partner at the site than male youth. Among those who had ever attracted a new partner at the site, 80% of female youth had attracted a new partner at the site in the past four weeks compared to half of male youth who had done so. This differential in new partnerships at the site by gender was also seen in the representative sample.

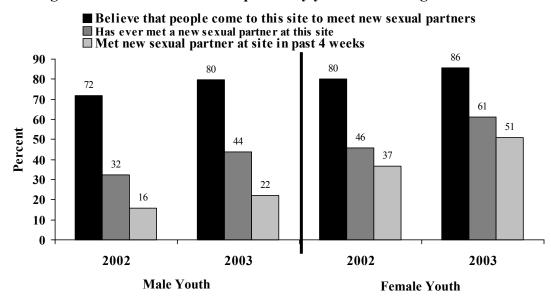


Figure 36. Partner selection reported by youth socializing at the sites.

Among youth who had ever met a new sexual partner at the site, male youth were less likely than female youth to use a condom with their last new partner. Approximately 54% of male youth in 2002 and 61% in 2002 reported using a condom with their last new partner from the site compared to approximately 80% of female youth.

In 2002, male youth who met a new partner at the site were more likely to have used a condom with their last new partner from the site if condoms were always available at the site compared to with new partners met at sites with condoms never available (Figure 37). However, the reverse was observed in 2003 where a higher proportion of male youth at sites where condoms were never available used a condom with their last new partner at the site compared to male youth interviewed at sites where they were always available. There was no difference in condom use by condom availability at the site among female youth who met a new partner. This same pattern of condom availability and use by gender was observed in the representative sample.

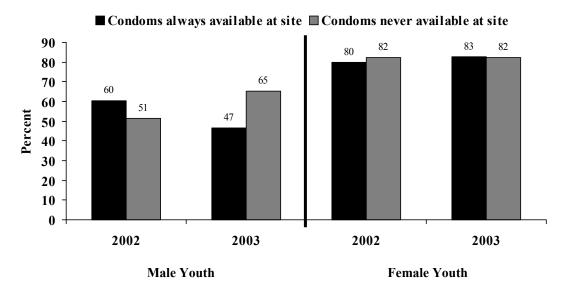
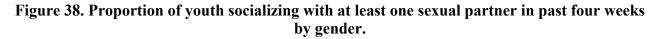


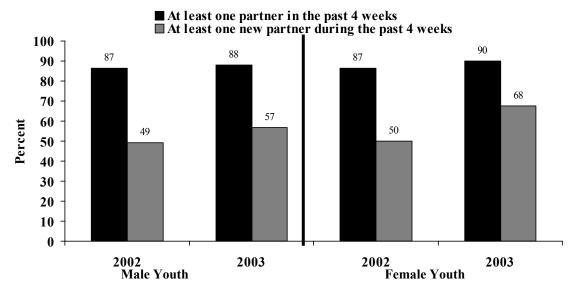
Figure 37. Condom use with last new partner met a site by condom availability at site.

Youth: Number of Sexual Partners

As in the representative sample, there was no difference in the proportion of male and female youth who had at least one sexual partner in the past four weeks (Figure 38). While there was not difference between youth in 2002 and the representative sample, youth in 2003 were more likely to have a new partner in the past four weeks than the representative sample. Among those with at least one partner in the past four weeks, the proportion with at least one new partner increased from 57% of male youth in 2002 to 64% of male youth in 2003 and form 58% of female youth in 2002 to 75% in 2003.

The distribution of the total number of partners during the past 12 months was similar among the youth and the representative samples in 2002 and in 2003. However, youth were slightly more likely to have a new partner during the past 12 months than people in the representative sample. Furthermore, youth in 2003 were more likely to report a new partner in the past 12 months than youth in 2002. In 2003, 86% of male youth and 80% of female youth reported a new partner in the past 12 months, compared to 78% of male youth and 67% of female youth in 2002





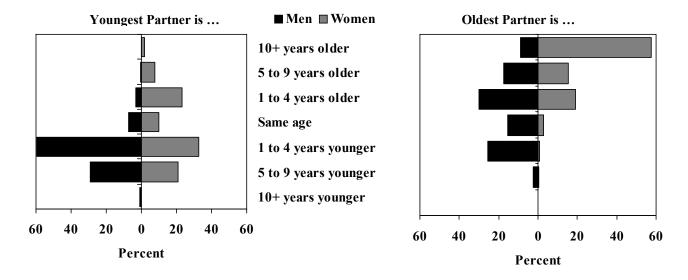
# Youth: Regular Sexual Partners

Youth were much less likely to have a long-term sexual partner compared to the representative sample. Approximately 60% of male youth and 58% of female youth in 2002 and 47% of female youth in 2003 reported a regular, long-term sexual partner.

# Youth: Age Difference among Partners

In 2003, individuals were asked the age of the youngest and oldest person that they had had sex with in the past 12 months. As in the representative sample, male youth on average tended to have partners younger than themselves while female youth were more likely to have older partners (Figure 39). Among male youth, the average age of the youngest partner is 3.4 years younger and their oldest partner was an average of 2.6 years older. The youngest partner of female youth was, on average, 1.0 years younger and their oldest partner was, on average, 16.0 years older with 58% of female youth having a partner 10 or more years older.

Figure 39. Age difference between respondent and youngest/oldest partner in the past 12 months.



#### Youth: Transactional Sex

The proportion of youth who engaged in transactional sex in the past three months decreased slightly among male youth between 2002 and 2003 and increased substantially among female youth during the same period (Figure 40). Female youth were more likely than women in the representative sample to have received money in exchange for sex during the past three months.

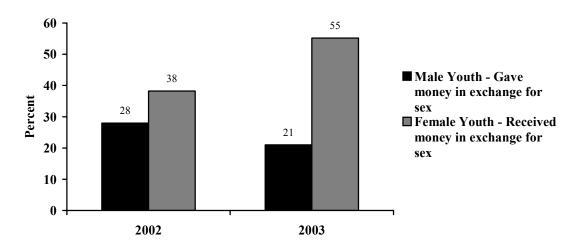


Figure 40. Transactional sex among youth.

# Youth: Gay sex

As in the representative sample, the proportion of male youth who reporting have sex with a man in the past four weeks increased from 2% to 4%.

# Youth: Self-Reported Condom Use

There was no change in condom use with new partners in the past four weeks by youth from 2002 to 2003. As in the representative sample, condom use with new sexual partners was common and more frequently reported by female youth than by male youth (Figure 41). Over 80% of female youth used a condom with their last new partner while approximately two thirds of male youth did so. Condom use at last sex with regular partners among male youth decreased from 2002 to 2003.

Approximately 45% of male youth and 61% of female youth reported always using a condom with their new partners in the past four weeks. Almost 15% of male youth and only 2% of female youth reported never using a condom with new partners in the past four weeks, while the remaining 41% of male youth and 37% of female youth with used condoms sometimes with new partners during this time period.

Among male youth who did not use a condom with their last new partner in the past four weeks, the most common reasons for not using a condom were that they did not have condoms at hand (57%) and they did not like condoms (43%). Among female youth, the most common reasons among female youth for not using a condom with there last new partner in the past four weeks were that their partner protested (39%) and they did not have condoms at hand (33%).

#### Youth: Perceived Condom Effectiveness

Among those who use condoms and had a partner in the past 12 months, 19% of male youth and 35% of female youth reported that they had had a condom break during this time period. Youths' perception of the effectiveness of condoms was similar to that of the representative sample. Over 40% of youth reported that they thought condoms were very effective in preventing STIs including HIV and

another 37% thought that they were somewhat effective. Approximately 15% thought that they were not very effective and only 1% thought that they were not effective at all. Around 4% did not know whether or not they were effective. On average, youth thought that a reasonable price for a condom should be 32 tenge.

#### Youth: Condom Availability

Having a condom at the time of interview increased substantially from 2002 to 2003. The proportion of male youth who had a condom that was seen by the interviewer increased from 14% to 30% and the proportion of female youth increased from 22% to 39%. Among those that had a condom seen by the interviewer, the most common brands seen were Desire (28% of male youth and 28% of female youth) and Durex (19% of male youth and 32% of female youth).

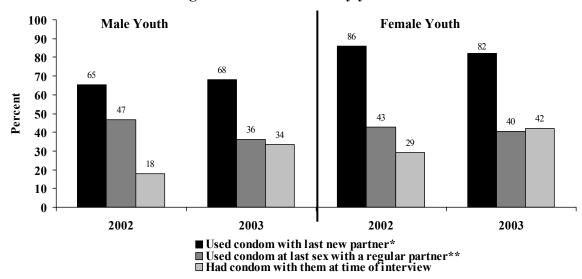


Figure 41. Condom use by youth.

As in the representative population, pharmacies and kiosks were most frequently named by male youth as the location where they obtained their last condom and female youth frequently named their partners and pharmacies (Figure 42).

<sup>\*</sup>Among youth with at least one new partner in past four weeks

<sup>\*\*</sup>Among youth with a regular partner

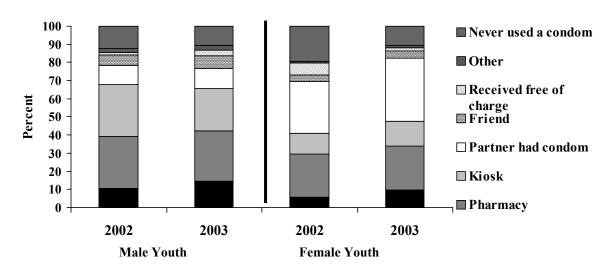


Figure 42. Location where last condom used was obtained.

Youth: Exposure to HIV/AIDS Education

In 2002, less than 15% of youth had attended an AIDS education session during the past three months. In 2003, individuals socializing at sites were asked if they had seen or heard any information about HIV/AIDS in the past 12 months and 85% of male youth and 93% of female youth responded that they had. As in the representative sample, television was the most frequently reported source from which information about HIV/AIDS had been received with almost three-quarters of youth having done so. Other commonly reported sources of information included newspapers, magazines, leaflets, and posters. The radio, friends and relatives, and doctors and health care workers also served as sources of information for over a third of youth. A quarter to a third of youth also reported hearing or receiving information about HIV/AIDS on the radio, from a friend or relative, from a doctor or healthcare worker, and/or in school. The proportion of youth receiving information from these sources is comparable to the representative sample. Youth were more likely to have received information from education places than older individuals with 18% of male youth and 23% of female youth having done so.

#### Youth: Opinion about HIV/AIDS as a Problem in Karaganda

In 2003, respondents were asked whether they perceived HIV/AIDS as a problem in Karaganda. As in the representative sample, the majority of male youth (83%) and female youth (79%) interviewed thought that HIV/AIDS was serious problem in Karaganda (Figure 43). Approximately 1% thought that it was not a problem at all in Karaganda.

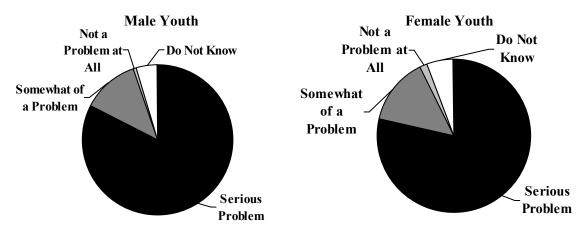


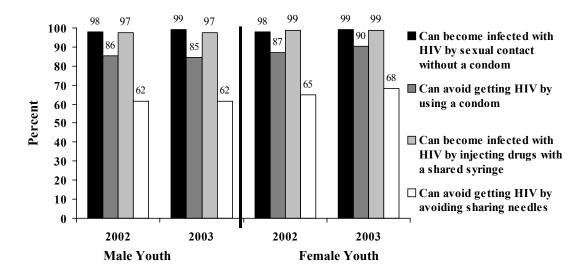
Figure 43. Youth opinion of HIV/AIDS as a problem in Karaganda.

## Youth: Knowledge of HIV/AIDS

Youth were also asked about their knowledge of HIV/AIDS transmission and prevention. Over 98% of youth knew that it is possible to become infected with HIV/AIDS through sexual contact without a condom and through injecting drugs with a shared syringe and over 85% knew it is not possible to become infected through a handshake. More youth in 2003 compared to youth in 2002 knew that HIV/AIDS could not be transmitted by eating from a common dish, swimming in a common pool, and via an insect bite. The mean number of questions answered correctly by youth increased from 4.5 out of 6 in 2002 to 5.0 in 2003.

As in the representative sample, more youth knew the modes of transmission of HIV than the methods to protect against transmission (Figure 44). Over 98% of youth reported that HIV/AIDS can be transmitted by sexual contact but less than 90% responded that people can avoid or reduce chance of getting HIV by using a condom. Over 97% of youth reported that HIV could be transmitted by injecting drugs with a shared syringe but only two thirds of youth named avoiding needle sharing as a way to avoid or reduce the chance of HIV transmission. Less than 2% of youth were unable to name any ways that an individual could avoid or reduce the chance of becoming infected with HIV. Most youth named two or three ways to avoid or reduce their chance of getting HIV.

Figure 44. Knowledge about how a person may become infected with HIV and ways to avoid or reduce chances of getting HIV.



Roughly three-quarters of male and female youth responded that a person who looks healthy can be infected with HIV. However, approximately 10% of youth replied that they were not sure.

# Youth: Perception of Personal Risk for HIV Infection

In 2003, respondents were asked their opinion of their personal risk of contracting the HIV/AIDS virus. Male youth had similar risk perception for HIV as men in the representative sample but female youth believed were more likely to believe that the were very or somewhat likely to contract the HIV/AIDS virus with over half reporting so. Approximately 15% of youth said that they were at no risk at all for contracting the virus and a similar proportion was unsure (Figure 45).

Men Women Do Not Do Not Very Very Know Know Likely Likely No Risk No Risk Somewha Somewha t Likely Not Very t Likely Likely Not Very Likely

Figure 45. Youth perception of likelihood of contracting the HIV/AIDS virus.

# Youth: HIV Testing

Youth had similar patterns of HIV testing and counseling as individuals in the representative sample. In 2002, 37% of male youth and 46% of female youth reported being tested for HIV in the past 12 months and in 2003, 40% of male youth and 37% of female youth reported being tested. Approximately half of male youth tested were tested voluntarily while testing for the other half was obligatory. Among female youth, testing was much more likely to be voluntary.

Among those who had been tested in 2003, 56% of male youth and 78% of female youth reported that they had received counseling about ways of transmission and other HIV/AIDS related information.

Youth were more likely than individuals in the representative sample to be interested in getting an HIV test voluntarily. Almost three quarters of youth were interested in such a test. When asked if they knew where in Karaganda a person could receive an HIV test, the Center of AIDS and a hospital or clinic were the most frequently named places was almost 60% of youth responding so. Less than 5% of youth not know where a person can get an HIV test.

#### Youth: Opinion about Injection Drug Use in the Unit of the City Where Interview Occurred

Respondents were asked about injection drug use in the area as well as about their personal drug use. As in the representative population, youths' opinion about drug use in the area increase substantially between 2002 and 2003 (Figure 46). In 2002, 11% of male youth thought that injection drug use was very common in the unit of the city in which they were interviewed and in 2003, this proportion had more than quadrupled to 49%. Similarly, among female youth, the proportion that thought injection drug use was very common in the area increased from 7% in 2002 to 41% in 2003. Less than 5% of youth thought that injection drug use did not occur in the area. The proportion that was not sure decreased from approximately 20% to 10%

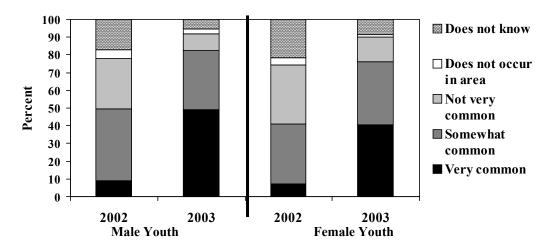


Figure 46. Youths' opinion of injecting drug use in city unit of interview.

Youth: Opinion Whether Injection Drug Users Socialize at the Site

The proportion of youth who thought that injection drug users socialized at the interview site increased from approximately 63% in 2002 to 81% of male youth and 73% of female youth in 2003 (Figure 47). Less than 10% of youth thought that injection drug users did not socialize at the site but many (12% to 32%) were unsure.

# Youth: Self-Reported Injection Drug Use and Knowledge of Needle Exchange Sites

Self-reported injection drug use increased substantially among male youth from 2002 to 2003 but did not change among female youth. Approximately half of male youth in 2003 had ever injected drugs compared to 28% in 2002. Male youth were more likely than female youth to have ever injected drugs. Among male youth who had ever injected drugs, the proportion who injected drugs in the past six months increased from 75% in 2002 and 86% in 2003. Female youth were also much less likely to have injected drugs recently compared to male youth but among those who had ever injected drugs, the proportion of female youth who had injected drugs during the past six months increased from 49% in 2002 to 72% in 2003. Similar proportions of youth had met with a narcologist or been arrested for injecting drugs compared to the representative sample. Over 40% of male youth and a third of female youth had heard of a place in the city where IDUs could obtain a new syringe.

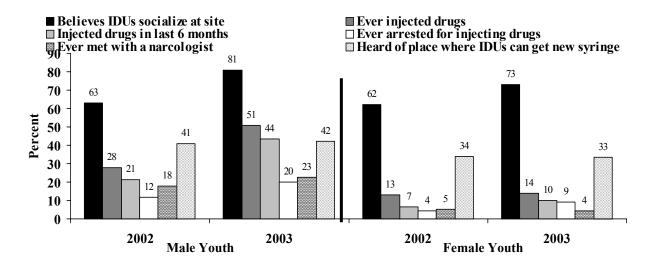


Figure 47. Injecting drug use behavior among youth socializing at sites.

#### Youth: Contact with Treatment Facilities

As in the representative sample, the majority of male (92%) and female (94%) youth had visited a state medical clinic. Contact with private medical clinics was not as common with 32% of male youth and 44% of female youth having ever visited such a facility. Approximately half of male youth and 63% of female had ever been to an emergency clinic. Approximately quarter of male and female youth had ever visited an infection hospital or a skin or venerological dispensary. Approximately 15% of male youth and 11% of female youth had visited a TB dispensary. Less than 10% of youth had ever visited a trust point, or talked with a private vernerological or narcological doctor, or talked to an outreach or social worker about injection drug use.

## Youth: Knowledge of STI Symptoms

Youth had similar knowledge about STI symptoms as individuals in the representative sample. In 2003, almost all male (95%) and female (98%) youth reported that they had heard of diseases or infections that could be transmitted through sexual intercourse. When asked to name signs or symptoms that indicate that someone has a sexually transmitted disease or infection, the most commonly named signs and symptoms by male youth were discharge from penis (70%), genital ulcers or open sores (44%), burning pain on urination (39%), and itching in genital area (33%). The most commonly named signs and symptoms by female youth were discharge from vagina (72%), genital ulcers or open sores (59%), itching in genital area (53%), and lower abdominal pain (40%). Only 4% of youth did not know any signs or symptoms that indicate that someone has a sexually transmitted disease or infection.

# Youth: Self-Reported STI Symptoms

The proportion of youth who reported STI symptoms and sought treatment was similar to the representative population. In 2003, 10% of male youth and 32% of female youth reported that they had experienced STI symptoms in the past four weeks (Figure 48). The most commonly reported symptom among male youth was pain on urination (5%) and among female youth, lower abdominal pain (11%). Among those who had symptoms, slightly over half of youth self-treated and slightly

under half went to a public clinic or hospital. Youth infrequently sought treatment from public clinics or hospitals. Approximately 8% of male youth and 13% of female youth did not receive treatment for their symptoms.

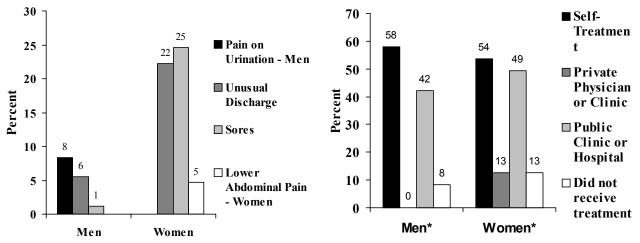


Figure 48. STI symptoms and treatment among youth.

\*Among the 10% of male youth and 32% of female youth with any symptoms in past 4 weeks.

#### Part 3: Commercial Sex Workers and Clients

Commercial sex workers are defined as women who reported receiving money in exchange for sex during the past three months. Clients of commercial sex workers are defined as men who reported giving money or other gifts in exchange for sexual service during the past three months. Commercial sex workers and clients were interviewed as part of the representative sample of patrons socializing at the sites. A quarter of men in the representative sample in 2002 and 30% in 2003 were clients of sex workers in the past three months (Figure 49). The proportion of women in the representative sample who were commercial sex workers increased from 28% in 2002 to 41% in 2003.

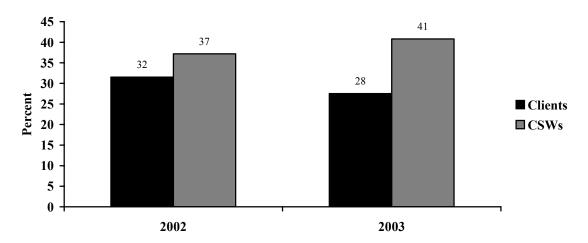


Figure 49. Proportion of commercial sex workers and clients in the representative sample.

# Clients and CSWs: Socio-demographic Characteristics

Male clients of CSWs did not differ significantly from men in the representative sample in terms of age, residence, education, marital status, and employment status. Clients in 2002 did not differ substantially from clients in 2003. The mean age of clients was 27 years in 2002 and 29 years in 2003. Over 90% of clients were residents of the city with the majority living in the city for five or more years although the proportion of clients who had lived in Karaganda all their life decreased from 63% in 2002 to 50% in 2003 (Figure 50). The proportion of clients who were married increased from 36% in 2002 to 44% in 2003. Clients lived slightly further away from the interview site than men in the representative sample. Approximately 39% of clients lived within a 10 minute walk of the interview site compared to 46% of men in the representative sample.

CSWs are significantly different from the women in the representative sample in terms of age, nights spent outside the city, marital status, education, and employment status. CSWs in 2002 did not differ substantially from CSWs in 2003. CSWs, on average, were younger than women in the representative sample and than their clients. The average age of CSWs was 23 years. Approximately 5% of CSWs were married, reported being employed fulltime, or were current students. Public high school was the highest educational attainment for half of CSWs. Approximately 38% of CSWs lived within a 10 minute walk of the site.

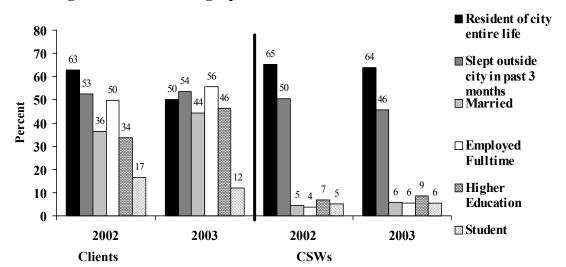


Figure 50. Socio-demographic characteristics of clients and CSWs.

# Clients and CSWs: Interviewer Opinion of Respondent

Interviewers were asked to record their opinion whether a male respondent was an IDU and a female respondent an IDU and/or CSW (Figure 51). There was no substantial difference in the perceived risk behaviors for clients of commercial sex workers and men in the representative sample in 2002. The proportion of clients who were thought to be IDUs increased from 24% in 2002 to 32% in 2003 but this increase was not as large as was observed among men in the representative sample. While the majority of CSWs were identified as such by interviewers, the proportion that was not identified as a CSW increased from 1% in 2002 to 7% in 2003. Approximately 14% each year were thought to be both a CSW and an IDU.

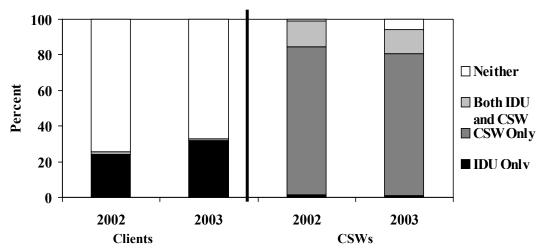


Figure 51. Interviewer opinion of risk behavior among clients and CSWs.

#### Clients and CSWs: Site Visitation

Clients did not attend sites quite as frequently as men in the representative sample. Approximately 21% of clients visited the site daily (Figure 52). Over two-thirds of clients first visited the site over one year ago, slightly less than the proportion of men in the representative sample. CSWs visited the

sites much more frequently than clients and more frequently than women in the representative sample. The proportion of CSWs who visited the site daily increased from 9% in 2002 to 39% in 2003. The majority of CSWs visited the site multiple times per week. Approximately two-thirds of CSWs had first visited the site over a year ago. On average, clients visited the site 2.9 days out of the past seven day and CSWs visited 4.5 of 7 days.

Clients less likely to walk to the site and more likely to come to the car by site than men in the representative sample but there was no difference in how CSWs and women in the representative sample came to the site. Approximately 46% of clients and 53% of CSWs walked to the sites, 34% of clients and 24% of CSWs came to the site by car, and the remaining 21% of clients and 24% of CSWs came to the site by public transportation.

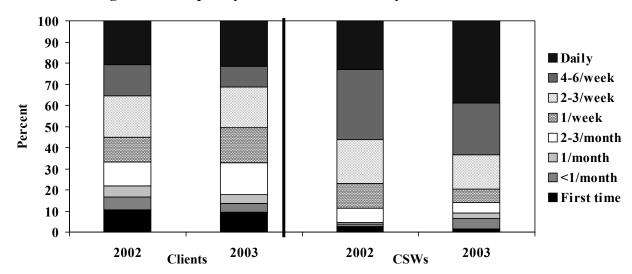


Figure 52. Frequency of attendance at site by CSWs and clients.

Clients and CSWs: Reason for Site Visit

As in the representative sample, the majority of clients (89%) reported coming to the site to socialize with friends but 44% reported coming to the site to meet a new sexual partner and 66% came to drink alcohol, substantially higher proportions than men in the representative sample who came to the site to engage in these activities. CSWs were also substantially more likely than women in the representative sample to report coming to the site to meet a new sexual partner (92%) and drink alcohol (44%) and less likely to report coming to the site to socialize with friends (60%).

# Clients and CSWs: New Partnership Formation at Sites

As expected, a significantly higher proportion of CSWs and clients thought that people came to the site to meet new sexual partners compared to men and women in the representative sample. Over 80% of clients and 98% of CSWs thought that people came to the site to meet new sexual partners (Figure 53).

In fact, approximately half of clients and almost 90% of CSWs had met a new sexual partner at the interview site. Among clients who met a new sexual partner at the site, the proportion of clients used a condom with their last new partner met at the site increased from 59% in 2002 to 68% in 2003, higher than the proportion of men in the representative sample for both years. The proportion of CSWs who used a condom with the last new partner met at the site was much higher, with approximately 85%

having done so. CSWS were much more likely to have med a new partner at the site in the past seven days compared to clients.

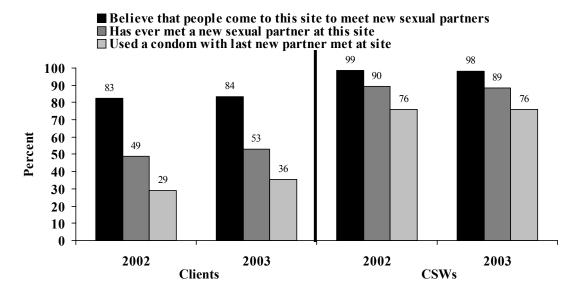


Figure 53. Partner selection reported by CSWs and clients socializing at sites.

Condom use among CSWs and clients is high and availability at sites does not significantly influence use by these individuals (Figure 54).

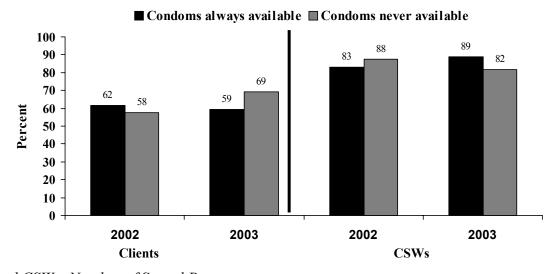


Figure 54. Condom use with last new partner met at site by condom available at site.

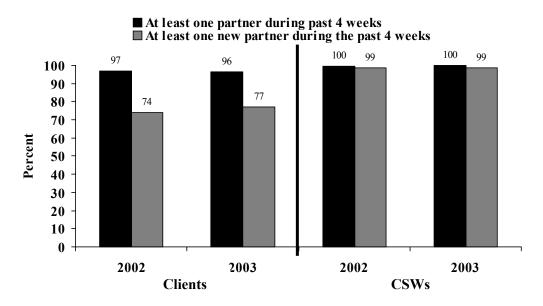
Clients and CSWs: Number of Sexual Partners

Clients of CSWs were much more likely than men in the representative sample to have had a new sexual partner during the past four weeks. Among those clients with at least one partner in the past four weeks, approximately three quarters had a new sexual partner during that time period (Figure 55). These men were also more likely to have a greater number of total partners including more new partners, during the past 12 months. Two thirds of clients in 2002 and over 75% in 2003 had four or

more new partners in the past 12 months compared to less than half of men in the representative sample.

Almost all CSWs reported having at least one new partner in the past four weeks. Over 85% of CSWs reported four or more new sexual partners in the past four weeks and 93% of CSWs had 15 or more new partners during the past 12 months. The majority of CSWs went to only one or two sites to look for clients.

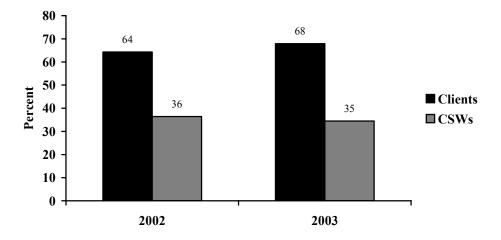
Figure 55. Proportion of CSWs and clients with at least one sexual partner during the past four weeks.



#### Clients and CSWs: Regular Sexual Partnerships

Two thirds of men who gave money in exchange for sex during the past three months had a long-term sexual partner (Figure 56). One third of women who received money in exchange for sex during the past three months had a regular partner.

Figure 56. Regular partnerships of CSWs and clients.



# Clients and CSWs: Age Difference among Partners

In 2003, individuals were asked the age of the youngest and oldest person that they had had sex with in the past 12 months. The distribution of the age difference between clients and CSWs is substantially different than men and women in the representative sample. The youngest partner of the majority of clients (96%) and CSWs (80%) was younger than themselves (Figure 57). The oldest partner for almost half of clients was younger than the client. The oldest partner for 91% of CSWs was 10 or more years older. On average, the youngest partner for clients was 8.9 years younger and the oldest partner was 1.1 years older. Among CSWs, the youngest partner was an average of 3.3 years younger and the oldest partner was an average of 22.8 years older.

Youngest Partner is ... Oldest Partner is ... ■ Clients ■ CSWs 10+ years older 5 to 9 years older 1 to 4 years older Same age 1 to 4 years younger 5 to 9 years younger 10+ years younger 100 80 60 40 20 0 20 40 60 80 100 100 80 20 40 60 80 100 60 40 20 0 Percent Percent

Figure 57. Age difference between respondent and youngest/oldest partner in past 12 months.

# Clients and CSWs: Gay Sex

Clients of CSWs were substantially more likely to have engaged in sex with another man in the past four weeks compared to the representative sample but the proportion was still small. The proportion of clients reporting having sex with another man in the past four weeks increased from 2% in 2002 and 7% in 2003.

## Clients and CSWs: Self-Reported Condom Use

Condom use was high among CSWs and their clients (Figure 58). Condon use by CSWs and clients was higher than among individuals in the representative sample. Over 90% of clients had ever used a condom. Among those clients who had a new partner in the past four weeks, 73% in 2002 and 81% in 2003 reported using a condom with their last new partner. Clients were also asked about consistency of condom use. Among those who had a new partner in the past four weeks, 62% reported always using a condom with new partners during this time period, 43% reported sometimes using a condom, and less than 8% never used condoms. As in the representative sample, not liking condoms (53%) and not having a condom at hand (24%) were the most common reasons given for not using a condom with

the last new partner. Condom use by clients at last sex with a regular partner decreased from 40% to 21%.

Condom use by CSWs was much higher than women in the representative sample. Less than 5% of CSWs had never used a condom. Almost 90% of CSWs used a condom with their last new partner and 65% in 2002 and 55% in 2003 also used a condom at last sex with a regular partner. As with women in the representative sample, the proportion who reported that they always used condoms with new partners was slightly lower. Two-thirds of CSWs reported that they always used condoms with new partners in the past four weeks. Less than 2% reported never using condom with new partners in the past four weeks.

In 2003, CSWs were asked specifically about condom use the last time then received money in exchange for sex and 87% reported using a condom the last time. Of those who used a condom, 41% of CSWs reported that they suggested using the condom, 36% said that the decision was made jointly with their partner, and 20% said that their partner suggested using the condom. Among those CSWs who did not use a condom last time they received money in exchange for sex, the most common reasons were that they did not have condoms at hand (46%) and their partner protested (42%).

# Clients and CSWs: Perceived Condom Effectiveness

Clients were slightly more likely to report having a condom break than men in the representative sample. Among those who use condoms and had a partner in the past 12 months, 27% reported that they had a condom break during this time period. A higher proportion of clients than men in the representative sample thought that condoms were very effective in preventing STIs, including HIV (49% vs. 40% respectively), and less than 1% of clients believed that they are not effective at all. Clients believed that a reasonable price for a condom is 44 tenge, slightly higher than the average reasonable price reported by men in the representative sample.

CSWs were more likely to report having a condom break than women in the representative sample with approximately 39% reporting so. CSWs had a similar perception of condom effectiveness as women in the representative sample with 46% believing they are very effective in preventing STIs including HIV and 4% believing that they are not effective at all. CSWs believed that a reasonable price for a condom is 31 tenge, approximately the same price reported by women in the representative sample and much lower than by clients.

## Clients and CSWs: Condom Availability

Clients were slightly more likely to have a condom with them at the time of the interview than men in the representative sample. The proportion that had a condom increased substantially from 24% in 2002 to 51% in 2003. CSWs were also substantially more likely than women in the representative sample and more likely than clients to have a condom with them at the time of the interview. As with the clients, the proportion who reporting having a condom at the time of the interview increased slightly from 61% in 2002 to 67% in 2003 but the proportion of interviewers who saw the condom increased substantially from 44% in 2002 to 63% in 2003. As in the representative sample, Durex was the most common brand of condom seen. Among those who had a condom with them that was seen by the interviewer, a third of clients and a quarter of women had a Durex brand condom.



Figure 58. Condom use by CSWs and clients.

\*Among individuals with at least one new partner in the past four weeks

Clients of CSWs were most likely to have obtained their last condom from a pharmacy or kiosk, the same locations as men in the representative sample. In 2003, grocery stories were also frequently reported by clients as where they obtained their last condom. CSWs were most likely to have obtained their last condom from a pharmacy, their partner, or a kiosk.

Among those who had ever used a condom, Durex was most commonly reported (31% of clients and 26% of CSWs) as the last brand of condom used. However, two fifth of clients and CSWs did not remember or know the last brand of condom used.

## Clients and CSWs: Exposure to HIV/AIDS Education

In 2002, 6% of clients and 9% of CSWs had attended an AIDS education session in the past 12 months, a slightly lower proportion than men and women in the representative sample. In 2003, individuals socializing at the sites were asked if they had heard or seen any information about HIV/AIDS in the past 12 months and approximately 86% of clients and 96% of CSWs, slightly higher than the proportions of men and women in the representative sample, responded in the affirmative. Television was the most frequently reported source from which this information was received with over three quarters of clients and CSWs having done so. Two thirds received information from newspapers and magazines. Clients also frequently reported receiving information from leaflets and posters (51%), radio (44%), and a friend or relative (43%). CSWs also frequently reported a friend or relative (57%), leaflets and posters (50%), and a doctor or healthcare worker (50%) as sources of information about HIV.

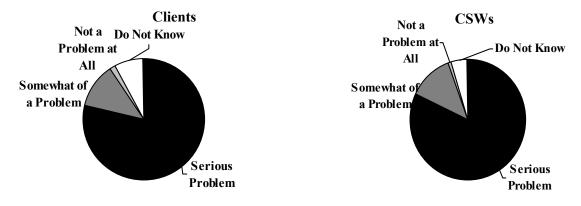
# Clients and CSWs: Opinion about HIV/AIDS as a Problem in Karaganda

In 2003, respondents were asked whether they perceived HIV/AIDS as a problem in Karaganda. As in the representative sample, the majority of clients (79%) and CSWs (82%) interviewed thought that

<sup>\*\*</sup> Among individuals with a regular partner

HIV/AIDS was a serious problem in Karaganda (Figure 59). Less than 2% thought that it was not a problem at all in the city.

Figure 59. Client and CSW opinion of HIV/AIDS as a problem in Karaganda.

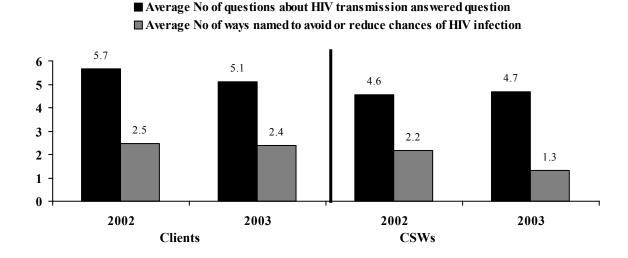


# Clients and CSWs: Knowledge of HIV/AIDS

Almost all clients and CSWs responded that it is possible to become infected with HIV/AIDS through sexual contact without a condom. Clients and CSWs were asked six questions about possible ways that HIV could be transmitted (Figure 60). On average, clients answered the same number of questions correctly (5.1 questions) compared to men in the representative sample. CSWs answered on average answered slightly fewer questions correctly (4.7 questions) than women in the representative sample.

CSWs and clients were more likely than individuals in the representative sample to name using condoms as a way to avoid or reduce the risk of getting HIV. Approximately 83% of clients in 2002 and 90% in 2003 named condoms a way to prevent transmission while 94% of CSWs did so. Clients and CSWs named the fewer number ways to avoid or reduce the risk of HIV with a mean of 2.4 and 1.3 ways respectively.

Figure 60. Knowledge of CSWs and clients about HIV transmission and ways to avoid or reduce risk of transmission.



As in the representative sample, almost three-quarters of those interviewed responded that a person who looks healthy can be infected with HIV. Approximately a fifth responded that they did not know.

## Clients and CSWs: Perception of Personal Risk for HIV Infection

In 2003, respondents were asked their opinion of their personal risk of contracting the HIV/AIDS virus. Clients were slightly more likely than men in the representative sample to report that they were very or somewhat likely to contract the HIV/AIDS virus with 55% of clients reporting so. CSWs were substantially more likely than women in the representative sample to think that they were very or somewhat likely to contract the virus with 71% of CSWs reporting so (Figure 61). Only 6% of CSWs thought that they were at no risk at all.

Men Women Do Not Do Not Know Very Know Very Likely No Risk No Risk Likely Not Very Likely Not Very Likely Somewha t Likely Somewha t Likely

Figure 61. Perception of likelihood of contracting the HIV/AIDS virus.

#### Clients and CSWs: HIV Testing

The proportion of clients tested for HIV in the past 12 months decreased slightly from 45% in 2002 to 36% in 2003. Half of those tested in 2002 and 40% in 2003 were tested voluntarily and the remainder had obligatory testing.

CSWs were much more likely to have been tested for HIV in the past 12 months compared to women in the representative sample but the proportion tested decreased from 69% in 2002 to 57% in 2003. Over three quarters of those tested were tested voluntarily.

Among those who were tested for HIV in 2003, 58% of clients, similar to the proportion of men in the representative sample, reported that they had received counseling about the ways of transmission and other HIV/AIDS related information. CSWs were more likely than women in the representative sample to report that they had received counseling with 80% reporting so.

Clients and CSWs were more likely than individuals in the representative population to report being interested in a voluntary HIV test. Approximately 69% of clients and 82% of CSWs in 2003 replied that they would be interesting in getting an HIV test voluntarily. In 2003, respondents were also asked if they knew where in Karaganda a person could receive an HIV test. The most frequently named places were the Center of AIDS with 63% of clients and 69% of CSWs responding as such and a hospital or clinic with 55% of clients and 62% of CSWs responding as such. Clients and CSWs were more likely than individuals the representative sample to name a venerological or dermatological center as a testing place (49% of clients and 47% of CSWs). Less than 5% of clients and CSWs did not know where a person could get an HIV test.

# <u>Clients and CSWs: Opinion about Injection Drug Use in the Unit of the City Where Interview Occurred</u>

CSWs and clients were also asked about injection drug use. The proportion of clients and CSWs who thought that injecting drug use was very or somewhat common in the area increased substantially from 2002 to 2003 (Figure 62). Over three quarters of clients and CSWs reported that drug use was very or somewhat common in 2003 compared to less about half who responded as such the year before. Less than 5% of clients and CSWs reported that drug use does not occur in the area.

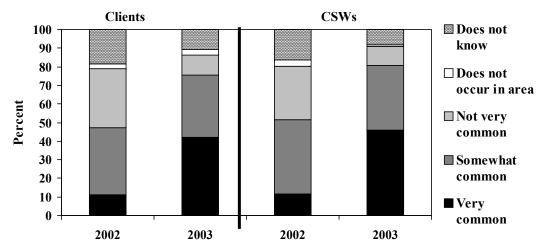


Figure 62. CSWs' and clients' opinion of injecting drug use in unit of interview.

Clients and CSWs: Opinion about whether IDUs Socialize at Site

Approximately two thirds of clients thought that IDUs socialized at the interview site. CSWs were slightly more likely than women in the representative population to believe that IDUs socialized at the interview site with over three-quarters of CSWs believing so (Figure 63).

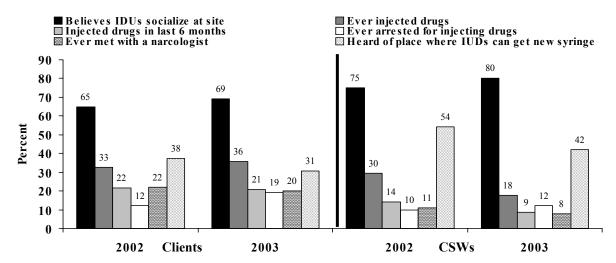


Figure 63. Injecting drug use behavior of CSWs and clients.

## Clients and CSWs: Self-Reported Injecting Drug Use

Clients reported injection drug use more frequently than CSWs. Approximately a third of clients had ever injected drugs and of those clients that ever inject drugs, 58% of clients in 2002 and 58% in 2003 had injected drugs in the past six months. Around 20% of clients had ever been arrested for injecting drugs or visited a narcologist. Approximately a third of clients had heard of a place in the city where IDUs can get a new syringe.

CSWs were much less likely than their clients to have injected drugs but more likely than women in the representative sample to have injected drugs. Injection drug use among CSWs decreased from 2002 to 2003. Approximately 30% of CSWs in 2002 had ever injected drugs compared to 18% in 2003. However, of those who had ever injected drugs, almost half of CSWs each year had injected in the past six months. Approximately 10% of CSWs had been arrested for injecting drugs or had visited a narcologist. Approximately 54% of CSWs in 2002 and 42% in 2003 had heard of a place in the city where IDUs can get a new syringe.

#### Clients and CSWs: Contact with Treatment Facilities

In 2002, clients had similar contact with medical treatment facilities as men in the representative sample with a couple of notable exceptions. Clients were more likely to have ever and to have more recently visited a private medical doctor, an infection hospital, and a skin/venerological dispensary than men in the representative sample.

CSWs also had similar contact with medical treatment facilities as women in the representative sample with a couple of exceptions. CSWs were substantially more likely to have ever and to have more recently visited an infection hospital, skin/venerological dispensary, a private venerological doctor, and a trust point compared to women in the representative sample.

## Clients and CSWs: Knowledge of STI Symptoms

In 2003, over 96% of clients and CSWs, the same proportion as in the representative population, reported that they had heard of diseases or infections that could be transmitted through sexual intercourse. When asked to name signs or symptoms that indicate someone has a sexually transmitted disease or infection, the most commonly named signs and symptoms by clients were discharge from penis (69%), genital ulcers or open sores (51%), itching in genital area (40%), and burning pain on urination (33%) the same as those named by men in the representative sample. The most commonly named signs and symptoms by CSWs were discharge from vagina (76%), genital ulcers or open sores (64%), itching in genital area (55%), and lower abdominal pain (50%). Less than 3% of clients and CSWs did not know any signs or symptoms which indicate that someone has a sexually transmitted disease or infection.

# Clients and CSWs: Self-Reported STI Symptoms

In 2003, clients and CSWs were more likely to report experiencing STI symptoms than individuals in the representative sample. Approximately 14% of clients and 43% of CSWs reported that they had experienced STI symptoms in the past four weeks (Figure 64). The most commonly reported symptom among clients was pain on urination (11%) and among CSWs, unusual discharge (34%). Among those who had symptoms, the highest proportion, 55% of clients and 62% of CSWs self-treated their symptoms. A public clinic or hospital was the most commonly reported location where treatment was sought (50% of clients and 45% of CSWs). Treatment was not sought by 15% of clients and 9% of CSWs.

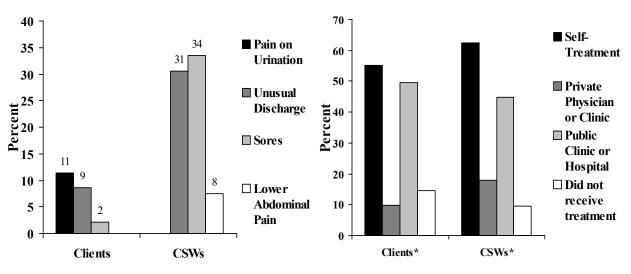


Figure 64. STI symptoms and treatment.

\*Among the 14% of clients and 43% of CSWs with any symptoms in past 4 weeks.

# **Part 4: Injection Drug Users**

The target of 200 interviews with IDUs was achieved each year but over-sampling of IDUs in 2002 was necessary to achieve the target number. The majority of IDUs, 78% in 2002 and 83% in 2003, were men. Because so few female IDUs were interviewed, 63 in 2002 and 36 in 2003, much of the analysis will be restricted to male IDUs.

# **IDUs:** Socio-demographic Characteristics

On average, male IDUs are younger than men in the representative sample with an average age of 26 years in 2002 and 25 years in 2003 for male IDUs. The socio-demographic characteristics of male IDUs in 2002 and 2003 were similar (Figure 65). Almost all male IDUs were residents of Karaganda. Almost a quarter were married. Less than 20% were employed fulltime. Approximately two thirds slept outside of the city in the past three months. The proportion of male IDUs who were students increased from 4% in 2002 to 10% in 2003.

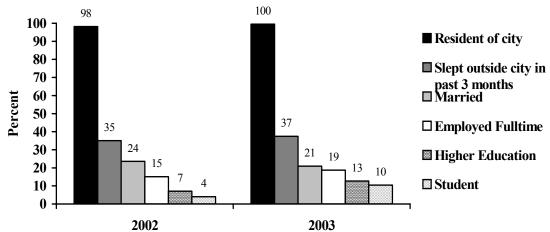


Figure 65. Socio-demographic characteristics of male IDUs.

IDUs: Interviewer Opinion of Respondent

At the start of each interview, interviewers were asked to record their opinion about risk behavior of the respondent. Approximately 96% of male IDUs in 2002 and 92% in 2003 were identified as such by interviewers (Figure 66). Among female IDUs, 91% in 2002 and 75% in 2003 were identified as IDUs including approximately half of these individuals who were also thought to be CSWs. Approximately 10% in 2002 and 17% in 2003 were identified as only a CSW. No female IDUs in 2002 and 8% in 2003 were not identified to be either an IDU, CSW, or both.

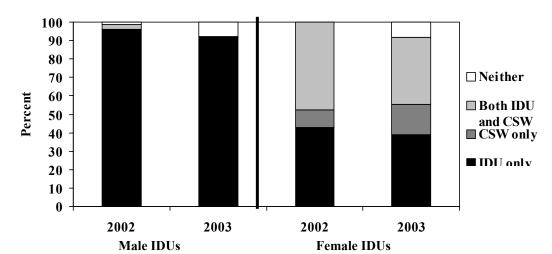


Figure 66. Interviewer opinion of IDU respondent.

#### *IDUs: Site Visitation*

Male IDUs visited the sites much more frequently than men in the representative sample. Approximately 83% of male IDUs in 2002 and 88% in 2003 visited the site at least once a week (Figure 67). On average, male IDUs visited the interview site four days in the past seven. Over three quarters of male IDUs first visited the interview site over a year ago, a slightly higher proportion than among men in the representative sample. Male IDUs were substantially more likely to walk to the site than men in the representative sample with 72% of male IDUs doing so. Approximately 21% of male IDUs came to the site by public transportation and only 6% came to the site by car.

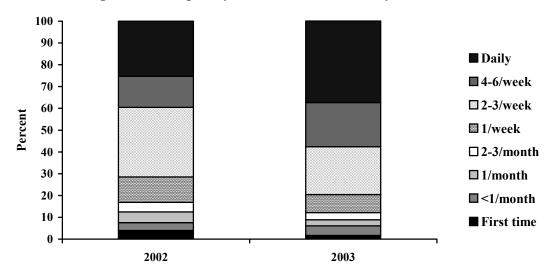


Figure 67. Frequency of attendance at site by male IDUs.

IDUs: Reason for Site Visit

As in the representative sample, the majority of male IDUs (85%) came to the site to socialize with friends. A third of male IDUs came to the site to drink alcohol and 16% came to the site to meet a new sexual partner, slightly smaller proportions than in the representative sample.

## IDUs: New Partnership Formation at Sites

IDUs were asked whether people came to the interview site to meet new sexual partners (Figure 68). Three quarters of male IDUs thought people came to the site to meet new sexual partners, similar to the proportion of men in the representative sample. The proportion of female IDUs who thought that people came to the interview site to meet new sexual partners was 84% in 2002 and 78% in 2003.

Approximately 38% of male IDUs reported meeting a new partner at the site. Approximately 56% of female IDUs in 2002 and 61% in 2003 reported meeting a new partner at the site, a proportion higher than in the representative sample.

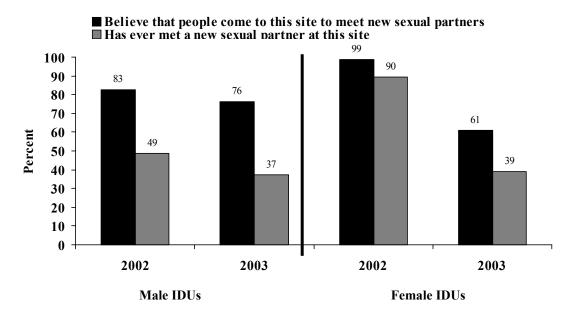


Figure 68. Partner selection reported by IDUs socializing at the sites.

Condom use with the last new partner among male IDUs was substantially less than among men in the representative sample. In 2002, 37% of male IDUs and 34% in 2003 reported using a condom with their last new partner met at the site. Condom availability at the site did not increase use among male IDUs.

## IDUs: Number of Sexual Partners

Over three-quarters of male IDUs had at least one sexual partner in the past four weeks, slightly less than the proportion of men in the representative sample with at least one partner during this timeframe (Figure 69). However, among those with at least one partner in the past four weeks, male IDUs were more likely than men in the representative sample to have had a new partner during the same time period. In 2002, 61% of male IDUs with at least one partner in the past four weeks had a new partner during that time period and in 2003, 65% did compared to approximately half of men in the representative sample in 2002 and 58% in 2003. Over 95% of male IDUs had a sexual partner in the past year, similar to the proportion of men in the representative sample. Of those with at least one partner in the past 12 months, over 80% of male IDUs had at least one sexual partner in the past 12 months.

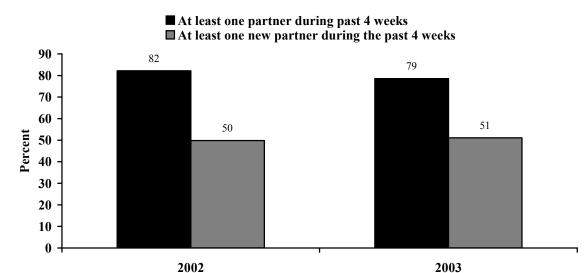


Figure 69. Proportion of male IDUs with at least one sexual partner in past four weeks.

# IDUs: Regular Sexual Partnerships

Male IDUs were less likely to have a regular, long-term sexual partner than men in the representative sample. Approximately 55% of male IDUs had a regular, long-term sexual partner compared to 70% of men in the representative sample.

# IDUs: Age Difference among Partners

In 2003, individuals were asked the age of the youngest and oldest person that they had had sex with in the past 12 months (Figure 70). Among male IDUs, the average age for the youngest partner was 4.9 years younger and the average age of the oldest partner was 1.0 years older. Among female IDUs, the average age for the youngest partner was 2.9 years younger and the average age for the oldest partners was 13.5 years older.

Figure 70. Age difference between respondent and youngest/oldest partner in past 12 months.



#### IDUs: Transactional sex

The proportion of male IDUs who gave money in exchange for sex during the past three months decreased from 27% in 2002 to 16% in 2003. Although there were few female IDUs interviewed, the proportion that reported having received money in exchange for sex during the past three months also decreased from 64% in 2002 to 47% in 2003 (Figure 71).

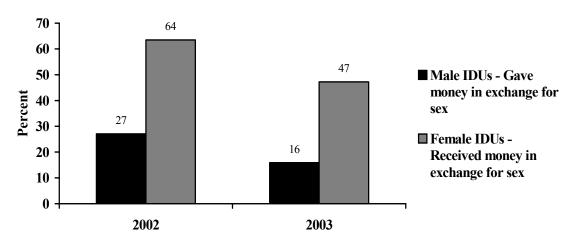


Figure 71. Transactional sex among IDUs.

IDUs: Gay Sex

Male IDUs were slightly more likely than men in the representative sample to have had sex with another man in the past four weeks. Approximately 3% of male IDUs reported having sex with a man in the past four weeks.

# IDUs: Self-Reported Condom Use

Among those with at least one partner in the past four weeks, approximately half of male IDUs used a condom with their last new partner during this time period (Figure 72). Among those with at least one new partner in the past four weeks, the proportion who reported always using a condom with new partners was only 29%, a smaller proportion than in the representative sample. Among male IDUs who did not use a condom at last sex with a new partner, the most common reasons given for not using a condom were that they did not have condoms at hand (51%) and they did not like condoms (49%). Male IDUs were less likely to have used a condom at last sex with a regular partner with less than a third of male IDUs using a condom at last sex with a regular partner.

#### IDUs: Perceived Condom Effectiveness

Among those who use condoms and had a partner in the past 12 months, 15% of male IDUs reported that they had had a condom break during this period. Approximately 31% of male IDUs reported that condoms were very effective in preventing STIs including HIV. Only 3% thought that they were not effective at all. On average, male IDUs thought that 19 tenge was a reasonable price for a condom, an average price that was less than what men in the representative sample thought as a reasonable price for a condom.

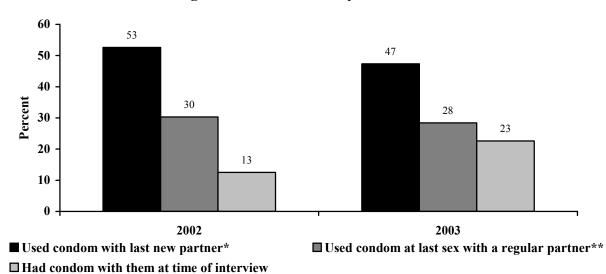


Figure 72. Condom use by male IDUs.

# **IDUs:** Condom Availability

The proportion of male IDUs who had a condom with them at time of interview increased from 13% in 2002 to 23% in 2003. Durex was the most common brand of condom seen by the interviewers (22%). Pharmacies, kiosks, and their partner were named frequently by male IDUs as places where they obtained their last condom. Among those who had ever used a condom, Durex was most commonly reported as the last brand of condom used (10%). However, approximately 45% of male IDUs could not remember or did not know the last brand of condom used.

## IDUs: Exposure to HIV/AIDS Education

In 2002, 15% of male IDUs had attended an AIDS education session in the past 12 months, a slightly larger proportion than men in the representative sample. In 2003, individuals socializing at the sites were asked if they had heard or seen any information about HIV/AIDS in the past 12 months and 84% of IDUs responded in the affirmative, a similar proportion to that in the representative sample. Television was the most frequently reported source from which this information was received with 69% of male IDUs having done so. Other commonly reported sources included newspapers, magazines, leaflets, posters, a friend or relative, or a doctor or health worker.

#### IDUs: Opinion about HIV/AIDS as a Problem in Karaganda

In 2003, respondents were asked whether they perceived HIV/AIDS as a problem in Karaganda. Male IDUs responded similarly to men in the representative sample. The majority of male IDUs (86%) thought that HIV/AIDS was a serious problem in Karaganda and only 2% thought that it was not a problem at all in the city (Figure 73).

<sup>\*</sup>Among individuals with at least one new partner in the past four weeks

<sup>\*\*</sup> Among individuals with a regular partner

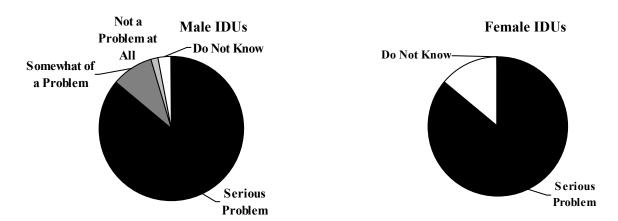


Figure 73. IDUs opinion of HIV/AIDS as a problem in Karaganda.

IDUs: Knowledge of HIV/AIDS

Male IDUs had a similar level of knowledge about how HIV/AIDS is transmitted compared to men in the representative sample. Male IDUs answered 4.7 of 6 questions correctly in 2002 and 5.1 questions correctly in 2003. On average, male IDUs also named a similar number of ways to avoid or reduce the risk of getting HIV as men in the representative sample. However, male IDUs were substantially more likely than men in the representative sample to name avoid sharing needles as a way to avoid or reduce the risk of getting HIV. Approximately 83% of male IDUs named avoiding needle sharing as a way to avoid or reduce the risk of getting HIV. About three quarters of male IDUs stated that a person who looks health can be infected with HIV.

#### IDUs: Perception of Personal Risk for HIV Infection

In 2003, respondents were asked their opinion of their personal risk of contracting the HIV/AIDS virus (Figure 74). IDUs were more likely than individuals in the representative sample to think that they are very or somewhat likely to contract the HIV/AIDS virus. Two thirds of male IDUs thought that they were very or somewhat likely of contracting the HIV virus compared to 45% of men in the representative sample. Only 8% of male IDUs thought that they were at no risk at all for contracting the virus compared to 20% of men in the representative sample.

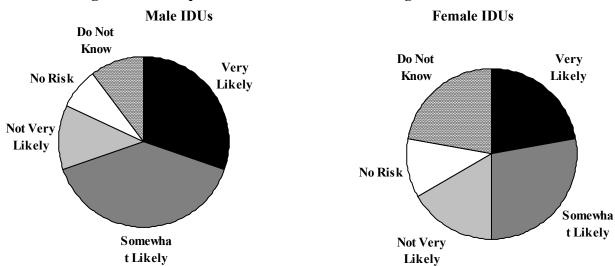


Figure 74. Perception of likelihood of contracting the HIV/AIDS virus.

# IDUs: HIV Testing

The proportion of male IDUs who had been tested for HIV in the past 12 months increased slightly from 55% in 2002 to 60% in 2003. Male IDUs were more likely than men in the representative sample to have been tested for HIV in the past 12 months. Among those tested, the proportion tested voluntarily decreased from 60% in 2002 to 43% in 2003. Testing for the remaining was obligatory.

Among those who were tested for HIV in 2003, 64% of male IDUs reported that they received counselling about the ways of transmission and other HIV/AIDS related information.

Three quarters of male IDUs in 2003 reported that they would be interested in getting an HIV test voluntarily, a higher proportion than in the representative sample of men. In 2003, respondents were also asked where in Karaganda a person could receive an HIV test. Three quarters of male IDUs named the Center of AIDS and 56% named a clinic or hospital as locations where an HIV test could be obtained. Less than 3% of male IDUs did not know where an HIV test could be obtained.

# IDUs: Opinion about Injection Drug Use in the Unit of the City Where Interview Occurred

Male IDUs were substantially more likely to report that injection drug use is very common in the unit of the interview compared to men in the representative sample. The proportion of male IDUs who reported that drug use was very common increased from 17% in 2002 to 65% in 2003 (Figure 75). Less than 1% of male IDUs reported that injection drug use did not occur in the unit.

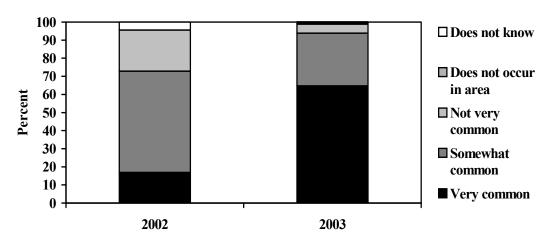


Figure 75. Male IDUs' opinion of injecting drug use in the unit of interview.

IDUs: Opinion whether Injection Drug Users Socialize at the Site

Approximately 88% of male IDUs in 2002 and 97% in 2003 thought that male IDUs socialized at the interview site, a much higher proportion than men in the representative sample who reported so.

# IDUs: Self-Reported Injection Drug Use

IDUs were also asked about specific drug use behaviors. Heroin and raw opium (hanka) were both frequently by male IDUs.

Approximately 10% of male IDUs had been injecting for less than one year. Male IDUs in 2002 had been injecting for an average of 4.1 years and in 2003 and average of 4.4 years.

Approximately 38% of male IDUs reported that they usually took drugs with the same group of people, 34% injected drugs in different contexts depending on the circumstances, and 25% took drugs individually. Only 3% took drugs with different groups (Figure 76).

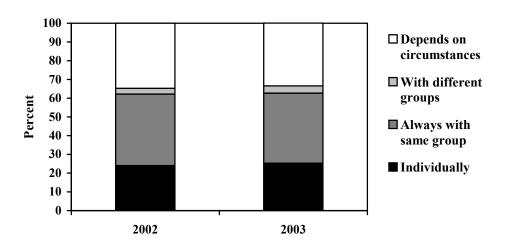


Figure 76. Main ways for male IDUs to take drugs.

The proportion of male IDUs who took drugs from a common reservoir decreased from 67% in 2002 to 56% in 2003 (Figure 77). Approximately 24% used a ready made drug solution without boiling.

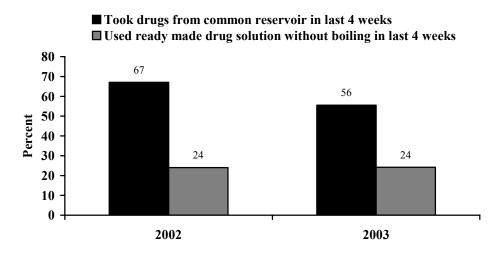


Figure 77. Drug preparation by male IDUs.

Male IDUs in 2003 were more likely than male IDUs in 2002 to have recently injected drugs. In the previous seven days, 72% of IDUs had injected in 2002 compared to 81% in 2003. The proportion who had injected the day before the interview increased from 61% in 2002 to 79% in 2003. Among those that did inject on the day prior to interview, male IDUs injected an average of 1.5 times.

Needle sharing behavior did not vary from 2002 to 2003. Two thirds of male IDUs shared a syringe in the past four week and 19% of male IDUs shared a needle at past injection (Figure 78). The average number of people with whom male IDUs shared a needle in the past four weeks was 1.2 people in 2002 and 1.5 people in 2003.

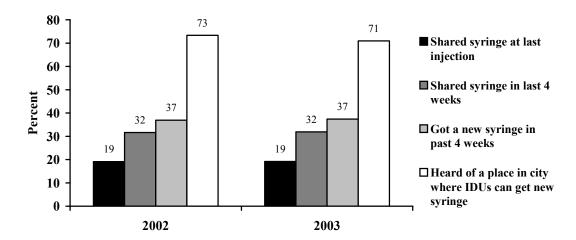


Figure 78. Needle sharing and use by male IDUs.

IDUs: Where to Obtain New Syringes

Approximately 37% of male IDUs obtained a new syringe in the past four weeks. Over 70% of IDUs had heard of a place in the city where IDUs could get a new syringe. Pharmacies were the most

frequently named sites by male IDUs as the place where they obtained their last syringe (Figure 79). Trust points and friends were other common sources for obtaining their last syringe.

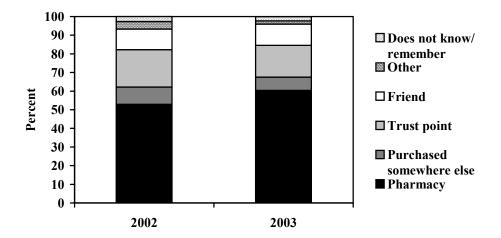


Figure 79. Locations where male IDUs obtained their last syringe.

Approximately 70% of male IDUs reported that they could get a new syringe whenever they wanted and only 1% of male IDUs responded that they could never get a new syringe whenever they wanted. In 2002, no money and police menace were the most frequently given reasons for not being able to obtain a new syringe when wanted. In 2003, the most common reasons were no money and the exchange station was too far away.

# **IDUs:** Arrests and Registration

The proportion of IDUs who had ever been arrested for injection drugs decreased slightly from 57% to 48% (Figure 80). Among those arrested, 63% in 2002 and 78% in 2003 thought that they had been registered by the police as an IDU.

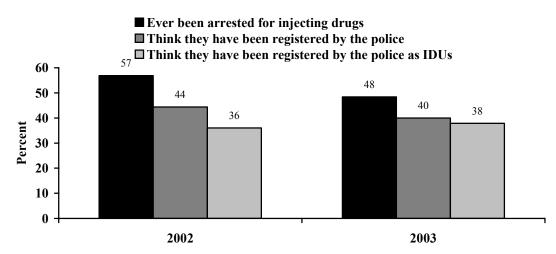
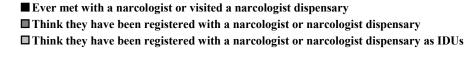


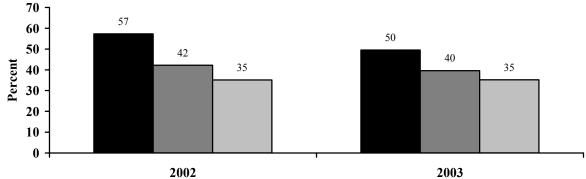
Figure 80. Arrests and registration with police of male IDUs.

Similar proportions of male IDUs reported that they had ever met with a narcologist or visited a narcologist dispensary as had been arrested by police. The proportion of male IDUs who had met with

a narcologist or visited a narcologist dispensary decreased slightly from 57% in 2002 to 50% in 2003 (Figure 81). Of those who had met with a narcologist, 61% in 2002 and 71% in 2003 thought that they had been registered as an IDU with the narcologist.

Figure 81. Male IDUs contact with narcologists and narcologist dispensaries.





#### IDUs: Contact with Treatment Facilities

In 2002, male IDUs had different contact with treatment facilities than men in the representative sample. Male IDUs were less likely to have been to a private medical clinic but had greater contact with more specialized treatment facilities. Male IDUs were more likely than men in the representative sample to have visited a trust point, a private narcological doctor, a TB dispensary, infection hospital and/or a skin or venerological dispensary, or talked with an outreach or social worker about injection drug use.

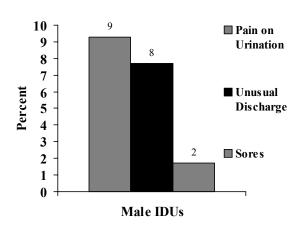
#### IDUs: Knowledge of STI Symptoms

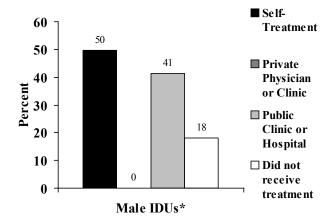
IDUs had similar knowledge of STI signs and symptoms as individuals in the representative sample. In 2003, 93% of male IDUs reported that they had heard of diseases or infections that could be transmitted through sexual intercourse. When asked to name signs or symptoms that indicate that someone has a sexually transmitted disease or infection, the most commonly named signs and symptoms by male IDUs were discharge from penis (62%), genital ulcers or open sores (37%), burning pain on urination (35%), and itching in genital area (28%). Approximately 7% of male IDUs did not know any signs or symptoms that indicate that someone has a sexually transmitted disease or infection.

#### IDUs: Self-Reported STI Symptoms

In 2003, IDUs were slightly more likely than individuals in the representative sample to report that they had experienced STI symptoms in the past four weeks. Approximately 12% of male IDUs and 33% of female IDUs reported experiencing STI symptoms in the past four weeks (Figure 82). The most commonly reported symptom among male IDUs was pain on urination (9%). Among those who had symptoms, self treatment was common (50%) as was seeking treatment from a public clinic or hospital (41%). No male IDUs sought treatment from a private clinic or physician and 18% did not receive treatment.

Figure 82. STI symptoms and treatment by male IDUs.





\*Among the 12% of male IDUs with any symptoms in past 4 weeks.

# Step 5: Summary of Findings for AIDS Prevention Programs Using M&E Indicators

# A. Summary of Indicators

See Summary of Indicators from Assessment, page 6.

# **B.** Main Findings and Recommendations

Overall Finding: The potential for a widespread HIV epidemic exists in Karaganda.

<u>Overall Recommendation</u>: HIV interventions are urgently needed in Karaganda to prevent HIV transmission among injecting drug users, sex workers and their partners, and urban youth.

There is limited HIV surveillance in Kazakhstan. Current available data suggest that the overall prevalence of HIV in the country may be quite low, but that some geographic areas have a high incidence of infection. Evidence to date indicates that the HIV epidemic is concentrated among injection drug users (IDUs) in Karaganda but could soon include more widespread heterosexual transmission.

PLACE data collected in 2002 and 2003 also indicate that a major epidemic could occur. Needle sharing among IDUs is high and while condom use also appears high, over-reporting of use is likely. IDUs reported comparable rates of new sexual partnerships but lower condom use than the general population of socializers at sites. Furthermore, the rate of new partner acquisition in all populations of interest, including the representative population, is high. Programs need to be implemented now to prevent further spread of the epidemic. Below are recommendations on how to respond to this immediate need for HIV prevention programs.

**Finding:** Characteristics of sites and of the people who socialize at them did not change substantially between 2002 and 2003.

**Recommendation:** The PLACE protocol should serve as a monitoring tool for intervention programs.

Two PLACE assessments were conducted in Karaganda, Kazakhstan one year apart. The goal of both assessments was to identify areas within the city and specific sites within these areas where HIV transmission is likely to occur. With a couple of notable exceptions, such as increased condom availability at sites and an increase of injection drug use and sex work at sites, the characteristics of the sites and the people socialize at them remained stable from 2002 to 2003.

In both years, bars, cafés, and restaurants were most frequently named as sites where people meet new sexual partners, commercial sex workers solicit clients, and/or injection drug users socialize. Over two-thirds of sites had been in operation for more than two years and most were located within a ten minute walk of a busy road or public transportation stop. Alcohol was consumed at the majority of sites and eating food and listening to music were also common.

Approximately equal proportions of men and women patronized the sites. Men, on average, tended to be slightly older than women. Most patrons were residents of Karaganda and many had lived there all of their lives. Patrons visited the sites frequently with over a quarter visiting the site daily.

As no intervention was introduced at the sites in the year that elapsed between the two assessments, it was observed, as expected, that there was no difference in the characteristics of the sites named or of the people who socialized at them. The similar profiles of the sites and their patrons in 2002 and 2003 suggest that the PLACE method systematically identifies a cross-section of high-risk areas within the city and specifically, sites where transmission is likely to occur.

Key informant interviews are a rapid method for obtaining sensitive data not otherwise available and are especially useful for obtaining data such as a list of sites that can be verified by other sources. By developing a list of sites from many key informants, the bias from any one individual informant is reduced. In addition, self-presentation bias is minimized by not asking about an individual's own sexual or drug-use behavior. Questions posed to key informants are not difficult to answer and key informants are asked for their own opinion. In 2003, only 4% of potential key informants declined and interview. The gender distribution and type of key informant for those who were interviewed and those who declined an interview were similar.

A good mix of different types of key informants was interviewed. Key informants from a wide range of occupations and demographic groups were interviewed and this variety is reflected by the number and different types of sites that were reported by the key informants. For example, people who lived and worked in an area such as flat owners coop personnel were productive key informants for identifying sites located within the area while public transportation drivers named sites all over the city.

The site verification interviews confirmed that key informants reported verifiable places that were in operation and that risky behaviors occurred at these sites. Refusal rates by site representatives were low with less than 1% of representatives declining an interview. Effort was taken to reassure participants that the information they provided would not be given to city authorities. Site representatives do not appear to have been reluctant to report behaviors considered socially unacceptable or illegal, such as onsite sex work, injection drug use, alcohol served without a liquor license, or youth coming to the site. There were no refusals specifically for these questions and the extent to which these activities were reported was quite high. Over 85% of site representatives reported alcohol consumption at their site although only a quarter of sites were bars, restaurants, nightclubs, or other venues where alcohol is traditionally served. Sex work was reported at approximately a quarter of the sites in 2002 and 44% in 2003.

Face-to-face interviews have been associated with underreporting of risky sexual behavior (4). The direction and extent of bias in the data obtained from individuals socializing at sites is difficult to assess. Self-presentation bias in self-reported sexual behavior data is likely to vary by age, gender, and behavior pattern and is probably impossible to untangle. Efforts to minimize self-presentation bias included requesting verbal, anonymous informed consent, assuring confidentiality, and designing simple, close-ended questionnaires. In 2003, 17% of individuals socializing at sites approached for an interview declined. However, the gender distribution for refusals did not differ substantially from the representative sample with 46% of refusals by men. Approximately 10% of those who refused where thought to be IDUs and another 10% were thought to be CSWs.

Both key informants and site representatives were asked whether the named site was a place where people meet new sexual partners, where IDUs socialize, where syringes can be found lying on the ground, and where commercial sex workers solicit clients. Comparing these responses is useful. Site representatives at approximately 70% of sites identified by key informants as sites where people meet new sexual partners reported that people did in fact meet new partners at the site. Similarly, approximately two-thirds of site representatives at sites identified as places where IDUs socialize reported that IDUs did in fact socialize at the site. Conversely, less than 45% of site representatives at sites not identified by key informants as places were IDUs socialize reported that IDUs socialized there. Key informants and site representatives had the greatest discord about sites where CSWs solicited clients. Site representatives at almost half of sites identified by key informants as places where CSWs solicit clients confirmed that the activity occurred at the site. This discord could be due to either key informants who over-report or are unfamiliar with activities at the sites they name or a reluctance of the site representative to report that commercial sex work occurs at the site.

The activities that occur at the site as reported by key informants and site representatives were also compared with those reported by individuals socializing at the sites. At all but one site where individual interviews where performed, at least one person reported meeting a new partner at the site regardless of whether key informants or the site representative identified the site as a place of where people meet new sexual partners. However, sites that were identified by key informants and site representatives as sites where people meet new sexual partners had a higher mean number of people interviewed who had met a new partner at the site compared to sites not identified as such. Among sites identified by key informants and site representatives as places where IDUs socialize, at least one injection drug user was interviewed in the representative sample at approximately 90% of these sites. Furthermore, sites identified as places where IDUs socialized had a higher mean number of IDUs included in the representative sample of socializing patrons compared to sites where IDUs were not reported to socialize.

Plans are currently being developed to incorporate site-based interventions into the current prevention strategy in Karaganda. The PLACE protocol provides a powerful tool for monitoring the behavior of high-risk individuals over time.

**Finding**: The PLACE method successfully identified sites where IDUs socialized.

<u>Recommendation</u>: The PLACE method can identify access points to reach this population for intervention programs.

The PLACE method was originally developed to identify places where new sexual partnerships are formed. Epidemiologic models suggest that HIV prevalence in a population is the consequence of the pattern of contacts of the entire population rather than of certain individuals (5). A site-based perspective can offer insights into sexual mixing. Traditional methods for defining sexual networks do not identify the sexual links between individuals that occur at social mixing sites. Methods that require individuals to name sexual partners are vulnerable to bias, since individuals with many sexual partners may be unable or unwilling to name their sexual contacts (6, 7) and are more willing to identify low-risk than high-risk contacts (8, 9).

Because of the importance of injection drug use in the HIV epidemic in Central Asia, the PLACE protocol was adapted to also identify places where injecting drug users can be reached for intervention.

The pattern of needle sharing partnerships in a community also shapes its HIV epidemic. Because injection drug use is illegal, IDUs often inject in private, making locations where the actual drug use occurs hard to access for prevention programs. Approximately 85% of male IDUs visited the site at least once a week suggesting that the sites identified by this study are excellent places for intervention program. Sites where IDUs socialize, rather than inject, provide an access point for interventions.

<u>Finding</u>: HIV was perceived as a serious problem in Karaganda. Many patrons believed that they were at high risk of contracting the virus.

<u>Recommendation</u>: Voluntary, confidential HIV testing and counseling should be readily available.

Approximately 80% of respondents believed that HIV/AIDS was a serious problem in Karaganda. Less than 2% did not think that it was a problem. Approximately 45% of individuals in the representative sample thought that they were very or somewhat likely of contracting the virus. Youth had a similar perception of their risk. However, CSWs and IDUs had a much higher perceived risk of contracting HIV/AIDS. Approximately 70% of CSWs and male IDUs thought that they were very or somewhat likely of contracting the virus.

CSWs and IDUs were also more likely to be interested in getting a voluntary HIV test. Just under two thirds of individuals in the representative sample were interested in a voluntary HIV test compared to 82% of CSWs and 75% of male IDUs who were interested in such a test. Voluntary, confidential HIV testing and counseling should be readily available and education and awareness programs should contain information about where such tests can be obtained.

**<u>Finding</u>**: Condom availability at sites increased from 2002 to 2003. Condom use remained high.

<u>Recommendation</u>: Condoms should be available at sites where people meet new sexual partners.

Current programs promoting condom use and availability need to be maintained and strengthened.

The proportion of sites where condoms were always available during the past 12 months increased from 24% in 2002 to 35% in 2003. Similarly, the proportion of interviewers who saw condoms at the site on the day of the interview increased from 19% in 2002 to 36% in 2003. Reported condom use with new partners remained high among all sub-populations in 2002 and 2003. Among patrons with at least one new partner in the past four weeks, two thirds of men and 80% of women reported using a condom with the last new partner in the past four weeks. However, condom use with the last new partner from the site was lower than with the last new partner in the past four weeks. The proportion who reported always using a condom with new partners in the past four weeks was also lower indicating that condom use with new partners was not consistent. Not having condoms at hand was a common reason given by men for not using a condom with their last new partner in the past four weeks. Programs promoting condom use, especially those promoting consistent use with new partners, need to be maintained to ensure that condom awareness, availability, and use continue to remain high.

<u>Finding</u>: There was a high degree of overlap among high-risk populations socializing at sites identified by this assessment.

<u>Recommendation</u>: HIV intervention activities should be implemented at sites where people at high risk of infection socialize, and in particular at sites where these high-risk groups overlap.

Overlap between high-risk populations socializing at the sites identified by this assessment was frequently reported by site representatives. Overlap sites were defined for this assessment as sites that had at least two of the following activities at the site: people meet new sexual partners at the site, youth (<18 years old) socialize at the site, CSWs solicit clients, and IDUs can be found at the site. The overlap of these key populations at sites provides the opportunity for the transmission of HIV from one high-risk population to another. At 14% of sites (63 of the 433) verified in 2002 and 28% (93 of the 328) in 2003, site representatives reported that all four of these high-risk groups could be found at their site. Twelve sites were identified during both the 2002 and 2003 sites as priority sites. Interaction between these populations will help facilitate the spread of HIV in the population as it can potentially be spread via two modes of transmission. Since so many sites were named in each year, sites with overlapping risk populations, particularly sites with all four high risk groups, should be prioritized for site-based interventions. (See appendix 1 for map of priority sites).

<u>Finding</u>: Many individuals socializing at the sites engaged in more than one risky behavior creating the potential for HIV to spread through several modes of transmission.

**Recommendation**: Multiple prevention messages are needed at the sites.

In addition to high-risk populations socializing at the same sites, many individuals reported engaging in two or more high-risk behaviors. Approximately a third of clients of CSWs had ever injected drugs and many of these individuals were current injection drug users. Half of male IDUs had at least one new partner in the past four weeks. These individuals are at increased risk of infection because they have the potential to become infected with HIV through sharing syringes and unprotected sex. Two thirds of men in the representative sample who gave money in exchange for sex during the past three months also had a regular, long-term sexual partner.

Injection drug use is a major force behind the transmission of HIV in Kazakhstan (1, 3). HIV spread consists of "intersecting epidemics" among drug using and non-drug using populations involving transmission associated with drug use and risky sexual behavior (10). High numbers of new syphilis infections and new cases of gonorrhea suggest that these sexually transmitted infections (STIs) are well established in Karaganda (Table 4). Approximately 8% of men and 27% of women in the representative sample had experienced symptoms of a sexually transmitted disease in the past four weeks. The proportion of CSWs and IDUs who had experience symptoms was even higher. STIs enhance the transmissibility of HIV. Determining the extent of overlap and mixing between high-risk populations is important in predicting the course of the epidemic and in developing future prevention and control strategies. Since many individuals socializing at study sites engage in more than one risky behavior, site-based prevention efforts should contain multiple messages aimed at preventing spread via different routes.

1,012

123

	1995	1996	1997	1998	1999	2000	2001	2002	2003
IV	1	1	2	1./	11	26	24	15	16

Table 4. Numbers of Newly Registered HIV, Syphilis, and Gonorrhea Cases in Karaganda

HIV 16

786

127

751

169

723

246

645

278

647

299

1,446

1,554

246

794

548

Syphilis

Gonorrhea

Finding: A high proportion of the population is exposed to HIV/AIDS prevention messages but these prevention messages and condoms are not reaching the populations where their impact could potentially be the largest. Sites are stable places for intervention programs.

Recommendation: Site-based educational and informational sessions should be introduced at

In 2002, approximately 10% of patrons reported attending an AIDS education session in the past 12 months. However, in 2003, when asked if they had heard or seen any information about HIV/AIDS in the past 12 months, over 80% responded in the affirmative. Television was the most commonly reported medium by which these messages were received, but high proportions of patrons also reported print media, including newspapers, magazines, and posters, as sources of information about HIV/AIDS. Despite this high level of exposure to information about HIV/AIDS and a high level of knowledge about modes of transmission, patrons were still uncertain about ways to prevent transmission. Knowledge about sexual intercourse without a condom and injecting drugs with a shared syringe as modes of HIV transmission was high in all sub-populations but when asked to name ways to reduce or prevent the transmission of HIV, a lower proportion of individuals identified using condoms or avoiding needle sharing.

HIV/AIDS prevention messages and condoms are not reaching the places where their potential impact could be the largest. Less than 10% of sites had ever had an HIV/AIDS prevention activity at the site and while condom availability at sites increased, less than 40% of sites had condoms always available during the past year. Just a handful of sites had an HIV/AIDS prevention poster displayed or HIV/AIDS prevention brochures available. The amount of HIV/AIDS prevention material available at these high-risk sites is inadequate as risky sexual and drug use behavior among socializing patrons is high.

Introduction of site-based interventions can fill this unmet need for prevention activities that was detected at these sites. Over two thirds of sites had been in operation for over two years indicating that the sites identified by this assessment are stable locations in which to introduce HIV/AIDS prevention programs. Of those site representatives who replied that IDUs could be found at their site. the majority responded that the site had been a place where drug injectors could be found for at least one year prior to the interview and often longer. Two-thirds of CSWs had first visited the site over a year ago and most CSWs only went to one or two sites to solicit clients. Similarly, over two-thirds of site patrons in the representative sample first visited the site where they were interviewed over one year ago indicating that these sites have well-established, loyal patronage.

<sup>380</sup> \* Source: Karaganda AIDS Center and STI Dispensary

The site-based approach enables intervention programs to target simultaneously many different at-risk or vulnerable populations, such as youth, IDUs, and CSWs and their clients. General education programs for youth have little effect on HIV or STI incidence so targeted intervention programs tailored for high-risk youth may be a more cost effective approach (11). Sites remain stable and can be used as intervention points even though the population moving through the sites is dynamic. Many people visit sites and put themselves at risk of becoming infected with HIV or infecting others. HIV/AIDS education sessions at sites were rare. Some of the sites identified by this study would be ideal locations for educational efforts. Sites offer stable intervention points to reach dynamic populations. Furthermore, intervention groups who focus on different populations such as youth, commercial sex workers, or IDUs should be enlisted to make sure that these vulnerable and often hard to reach populations are included in intervention programs.

Previous studies have demonstrated that decreasing the length of time between prevention efforts and situations where that knowledge is translated into action results in a decrease in risky behavior (12, 13). Site-based interventions have the advantage of reaching individuals at a critical time in condom use negotiations (12). Additionally, site-based interventions are useful in reaching injection drug users (IDUs), a somewhat isolated population that is often hard to reach at the locations where drug injection actually occurs. Since IDUs frequently inject in private locations, introducing an intervention at sites where IDUs socialize, rather than where they inject, provides a point of access to this population. Finally, a site-based intervention is an attractive prevention approach because sites offer an informal support network. Daily and weekly attendance at sites by many patrons is likely to familiarize site managers with patrons well enough to provide a mechanism for education and social support that can be utilized by prevention programs to decrease both sexual and injection transmission of HIV (12).

<u>Finding</u>: Commercial sex work was common. Clients of commercial sex workers are accessible at sites.

**Recommendation:** HIV prevention programs for commercial sex workers and clients should focus on sites named by many key informants.

Almost 60% of key informants reported that CSWs solicit clients in the interview unit and were able to name specific sites where commercial sex work occurred. Site representatives substantiated the key informant reports that commercial sex work occurs in the units with 25% of site representatives in 2002 and 44% in 2003 reporting that CSWs solicit customers at their site. Both CSWs and clients socialized at sites identified by this study. Over a quarter of men reported giving money in exchange for sex during the past three months making the sites in this study reasonable locations to access this hard to define and identify population. The proportion of women who reported receiving money in exchange for sex during the past three months was 32% in 2002 and 41% in 2003. Clients were more likely to be interviewed at sites named by 15 or more key informants while CSWs were only slightly more likely to be interviewed at sites named by 15 or more key informants. Intervention programs for commercial sex workers and clients should be located at sites named by many key informants.

Approximately one third of the socializing population was interviewed at over sampled sites named by 15 or more key informants. The proportion of men and women in the representative sample who reported symptoms of STIs was also higher at sites named by 15 or more key informants. Sites named by fewer than 15 key informants had a higher proportion of patrons who lived within a ten minute walk of the site, who came to the site on foot, and who visited the site daily compared to sites named by

many key informants. These patrons were also less likely to report coming to the site to drink alcohol or meet a new partner than patrons at more frequently named sites.

<u>Finding</u>: Perception of drug use in the area increased. High risk behaviors by IDUs, including needle sharing and taking drugs from a common reservoir, were stable.

<u>Recommendation</u>: Programs focused on reducing high-risk injection drug use behaviors need to be strengthened.

The proportion of site representative and individuals socializing at the sites who thought that injection drug use was very or somewhat common in the area increased substantially from 2002 to 2003. The proportion of key informants who thought that injection drug use occurred in the area was high both years but the proportion of site reports for sites where IDUs could be found increased from 39% to 61%. The proportion of site representatives who reported that injection drug users could be found at the site increased from 51% in 2002 to 63% in 2003. The proportion of men in the representative sample who had ever injected drugs increased from 27% in 2002 to 42% in 2003 and the proportion of current IDUs increased from 21% to 36%.

The target of 200 interviews with IDUs was achieved both years although oversampling was required in 2002. Injection drug use was more common among men than women. However, the discrepancy between the high levels of key informants who reported that injection drug use occurred in the area and the need to oversample IDUs in 2002 suggests that some IDUs are still missed by this method. Individuals could be reluctant to report personal injection drug use despite reassurances that the information they provide would remain confidential. Alternatively, if a substantial proportion of the IDUs were less than 18 years old, they would not have been included in this assessment because they did not meet the age of eligibility for interview. Furthermore, while drug use was perceived as common in the area, key informants may be less sure about specific sites where IDUs socialize.

High risk behaviors among IDUs remained stable from 2002 to 2003. Among male IDUs who had injected drugs within the past six months, 19% shared a syringe at last injection, 32% had shared a syringe in the past four weeks, and 37% got a new syringe in the past four weeks. Always injecting with the same group was the main social context in which most male IDUs took drugs but different contexts depending on the circumstances and injecting individually were also frequent contexts for taking drugs. A quarter of male IDUs used a ready made drug solution without boiling and 67% in 2002 and 56% in 2003 took drugs from a common reservoir in the past four weeks. The proportion that had been arrest for injecting drugs decreased from 57% to 48%. Programs focused on reducing high-risk injection drug use behaviors need to be maintained.

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# Appendix 1 – Additional Tables

Table A1						
Characteristics of Key Informants – Karaganda  Baseline 2002 Follow-Up 2003						
Field Work	Baseline 2002	Follow-Up 2003				
Field Work						
Days of key informant interviewing	5	6				
Number of interviewers	26	23				
Number of key informant interviews completed	900	704				
Number of refused interviews		29				
Number of Key informant reports	3140	2042				
Number of sites reported	645	556				
Number of new sites reported during follow-up		363				
Number of sites reported during baseline and follow-up		193				
Number of sites reported at baseline and not follow-up		448				
Type of Key informant						
Male	51%	57%				
Female	49%	43%				
Age of Key Informant						
1819	5%	7%				
2024	16%	20%				
2529	17%	17%				
3034	15%	13%				
3539	13%	14%				
40+	34%	29%				
Drug Use and Sex Work						
Believe drug use occurs in unit	79%	80%				
Has seen syringes in last 4 weeks	34%	44%				
Reports SWs solicit customers in unit	56%	58%				
Site Reports						
Number of site reports in unit	882					
Number of site reports outside unit	2,258					
Number of site reports within 10 minute walk	· 	900				
Number of site reports further than a 10 minute walk		1,142				
% of site reports where people meet new sexual	74%	80%				
partners						
% of site reports where IDUs can be found	39%	61%				
% of site reports where syringes can be found	30%	51%				
% of site reports where SWs solicit customers	66%	72%				

Table B1 Characteristics of Sites - Karaganda				
Characteristics of Site	2002 (N=443)	2003 (N=328)		
Type of Site	,	, ,		
Bar/Café/Restaurant	24.2	27.7		
Night Club/Disco	1.8	1.5		
Casino	0.5	0.6		
Gay Club	0.0	0.0		
Hotel	1.4	2.1		
Sauna	2.5	1.8		
Billiards	0.9	0.9		
Game Club	0.2	0.0		
Computer Club	0.2	0.0		
Dormitory	2.0	0.9		
Private Apartment/Flat	4.1	5.8		
Basement/Roof	1.1	0.3		
Stairwells	3.4	2.4		
Unused/Abandoned Building	6.6	3.1		
School	1.1	5.2		
College/Professional School	1.4	0.9		
University Campus/Tutorial Institute	0.2	0.3		
Railway Station	0.2	0.6		
Long Distance Bus Station	0.5	0.3		
Airport	0.0	0.0		
Truck Stop/Stand	0.0	0.6		
Taxi Stand	2.7	2.7		
Street	8.8	4.6		
Street Tunnel	0.0	0.0		
Market	2.3	1.8		
Park	5.2	7.9		
Other	28.8	27.7		
Total	100.0	100.0		
Number of Times Site Named by Key Informants	100.0	100.0		
0 Times	0.0	11.0		
1 Time	35.9	0.9		
2 Times	19.2	28.7		
3-5 Times	23.4	34.5		
6-10 Times	9.9	14.3		
>10 Times	11.8	10.6		
Total	100.0	100.0		
Years site has been in operation	100.0	100.0		
Less than one year	7.0	6.4		
1 to 2 years	25.5	18.3		
3 to 5 years	26.4	34.8		
6 to 10 years	12.6	10.1		
More than 10 years	22.1	18.3		
Not applicable	6.3	12.2		
Total	100.0	100.0		
	100.0	100.0		
Is the site within a ten minute walk of	<u> </u>	00.0		
A Busy Road		80.2		
A Public Transportation Stop		85.1		
A Trucking Route		9.8		

Table B1 Characteristics of Sites - Karaganda				
	2002 (N=443)	2003 (N=328)		
Busy times at site				
Mondays	88.0	80.8		
Tuesdays	91.4	82.6		
Wednesdays	92.1	82.0		
Thursdays	92.3	84.5		
Fridays	97.7	95.7		
Saturdays	98.4	97.6		
Sundays	94.1	93.6		
Winter	48.3	42.1		
Spring	73.6	71.0		
Summer	86.7	93.6		
Autumn	71.6	68.3		
Holidays	72.7	83.8		
Other	1.4			

Table B2 Demographics of Site Representatives – Karaganda				
Gender of respondent		,		
Male	43.6	46.7		
Female	56.4	53.4		
Total	100.0	100.0		
Age of respondent				
18-19	5.6	6.4		
20-24	21.9	22.6		
25-29	15.1	24.1		
30-34	11.1	15.6		
35-39	11.1	9.8		
40-44	11.3	11.0		
45-49	8.1	6.1		
50+	15.8	4.6		
Total	100.0	100.0		

Table B3				
Size of Site - H		02	20	03
	(N=443)			328)
	Men	Women	<b>\</b>	,
Maximum number of people who come to site in one				
<10	19.6	26.2	-	-
11-20	26.2	23.7	_	
21-50	25.3	21.2	_	<del>-</del>
51-100	17.4	17.6	_	<del>-</del>
101-300	8.6	7.9	_	<del>-</del>
301-500	1.8	2.0	-	-
501-1000	1.1	1.4	-	-
Total	100.0	100.0	-	-
Number of people who come to the site during a busy	y time		_	
<=10		· <del>-</del>		3.7
11-25	-	<del>-</del>		).5
26-50	-	<b></b>		0.
51-100	-	-		).1
101-150	-	-		.0
151-200	-	-		.1
201-250	-		0.3	
251-300	-		0.9	
301-350	-		0.6	
351-400	-	<del>-</del>		.3
401-450	-	<del>-</del>		.0
451-500				.0
>500	-		1.5 100.0	
Total	-	-		+
Number of man and waman accipiting at aits during	Men	Women	Men	Women
Number of men and women socializing at site during <=10	most recent	busy time	45.7	F 4
11-25			45.7 28.1	54. 24.7
26-50			14.9	10.4
51-100			7.6	7.6
101-150			1.5	0.6
151-200			0.3	0.6
201-250			0.6	0.0
251-300			0.9	1.2
301-350			0.0	0.3
351-400			0.0	0.0
401-450			0.0	0.0
451-500			0.3	0.0
>500			0.0	0.0
Total			100.0	100.0
Number socializing upon interviewer arriaval	<u> </u>			1
0	8.8	11.5	7.9	9.5
1-4	47.0	48.5	44.5	53.1
5-9	24.8	22.4	27.7	23.5
10-19	11.5	11.1	12.2	9.2
20-49	6.1	4.8	6.7	4.3
50+	1.8	1.8	0.9	0.6
Total	100.0	100.0	100.0	100.0

Table B4 Onsite Activities – Karaganda				
	2002 (N=443)	2003 (N=328)		
Activities onsite				
Beer consumed	85.1	84.2		
Hard alcohol consumed	71.8	77.4		
TV or Video viewing	16.3	17.7		
Dancing	33.4	34.8		
Music	66.6	53.4		
Computer Games	4.1	3.7		
Eating food	63.7	53.7		
Striptease Show	2.0	1.2		
Men meet new female sexual partners here	60.3	64.6		
Women meet new sexual partners here	59.4	63.7		
Men meet male (gay) sexual partners	7.9	7.3		
Someone onsite facilitates partnerships	7.0	9.5		
Staff meet new sexaul partners here		18.0		
Female sex workers solicit customers here	24.6	43.9		
How long female sex workers have solicited custome	ers at site			
Less than one year	2.9	3.4		
1 to 2 years	8.8	13.4		
3 to 5 years	5.6	14.9		
6 to 10 years	2.3	3.1		
More than 10 years	1.8	3.7		
Do not know	3.2	16.8		
Not applicable	75.4	44.8		
Total	100.0	100.0		

Table B5 Overlap of High-Risk Populations Socializing at Sites – Karaganda					
	2002 (N=443)	2003 (N=328)			
People meet new sexual partners and at least some youth (age <18) at site	60.1	47.3			
People meet new sexual partners and commercial sex workers solicit clients	22.4	43.6			
People meet new sexual parnters and IDUs socialize	33.0	43.3			
At least some youth (age <18) at site and commercial sex workers solicit clients	24.6	35.1			
At least some youth (age <18) at site and IDUs socialize	49.7	48.8			
Commercial sex workers solicit clients and IDUs socialize	15.4	33.8			
People meet new sexual partners, at least some youth (age <18) at site, commercial sexwoker solicit clients, and IDUs socialize	14.0	28.1			

Table B6						
Characteristics	of Site Pat 2002 (N=44		anda			
Loss Moro Almost						
	None	than Half	Half	than Half	AII/AII	
Percentage of sites with male patrons who .						
Are Unemployed	45.2	33.2	12.4	6.3	2.9	
Are Students	20.5	53.1	14.5	7.2	4.7	
Are < Age 18	27.5	39.5	15.6	11.7	5.6	
Live within a 10 minute walk of site	6.3	23.5	26.6	23.3	20.3	
Residents of this unit	5.0	16.3	20.3	23.9	34.5	
Come here at least once a week	4.7	34.1	31.6	18.1	11.5	
Drink alcohol at site	18.7	29.6	18.7	12.6	20.3	
Find a new sexual partner while at site	34.8	50.6	10.8	2.3	1.6	
Appear to be injection drug users	60.7	33.4	3.6	1.6	0.7	
Percentage of sites with female patrons who	·	1		1		
Are Unemployed	42.0	35.0	12.0	7.0	4.1	
Are Students	23.9	52.1	12.4	7.2	4.3	
Are < Age 18	26.9	40.0	16.3	12.6	4.3	
Live within a 10 minute walk of site	9.0	25.1	27.1	22.6	16.3	
Residents of this unit	6.8	17.8	21.4	24.6	29.4	
Come here at least once a week	4.7	37.9	35.9	12.6	8.8	
Drink alcohol at site	25.5	34.	12.4	12.6	15.4	
Find a new sexual partner while at site	33.9	48.8	12.2	3.2	2.0	
Appear to be injection drug users	73.8	22.4	2.7	0.5	0.7	
	2003 (N=32			0.0	0	
	None		Some		Most	
Percentage of sites with male patrons who .						
Are Unemployed	32.0		52.7		15.2	
Are Students	26.2		61.6		12.2	
Are < Age 18	37.2		50.9		11.9	
Live within a 10 minute walk of site	4.9		41.5		53.7	
Live outside this unit	17.1		70.1		12.8	
Come by car or taxi	28.4		50.3		21.3	
Come by public transporation	30.5		53.1		16.5	
Come here at least once a week	10.1		55.2		34.8	
Drink alcohol at site	14.3		48.2		37.5	
Find a new sexual partner while at site	30.8		57.0		12.2	
Appear to be injection drug users	47.6		41.2		11.3	
Appear to be buying sex (clients)	42.4		50.6		7.0	
Are homosexual	82.3		17.1		0.6	
Percentage of sites with female patrons who						
Are Unemployed	26.5		61.6		11.9	
Are Students	31.1		59.2		9.8	
Are < Age 18	35.1		53.1		11.9	
Live within a 10 minute walk of site	7.0		41.2		51.8	
Live outside this unit	18.0		71.0		11.0	
Come by car or taxi	38.1		46.0		15.9	
Come by public transporation	31.4		54.6		14.0	
Come here at least once a week	12.2		55.8		32.0	
Drink alcohol at site	18.0		64.3		17.7	
Find a new sexual partner while at site	30.5		58.5		11.0	
Appear to be injection drug users	54.9		39.9		5.2	
Appear to be selling sex	47.6		45.4		7.0	

Injection Drug Hee Aroun				
injection Drug Ose Aroun	d Sites – Karaganda			
	2002	2003		
	(N=443)	(N=328)		
Number of used syringes observed by interviewer at the site				
0	91.4	87.2		
1	2.7	5.2		
2	2.2	3.1		
3	1.1	3.1		
4	0.9	1.2		
5+	1.6	0.3		
Total	100.0	100.0		
How common is injection drug use in this unit?				
Very common	16.0	19.5		
Somewhat common	38.6	44.2		
Not very common	38.8	25.9		
Does not occur in this area	6.6	10.4		
Total	100.0	100.0		
Have you seen used syringes lying around inside or	outside this place in the p	past 3 months?		
Yes	36.6	42.4		
No	63.4	57.6		
Total	100.0	100.0		
Is this a place where drug injectors can be found?				
Yes	51.0	62.5		
No	49.0	37.5		
Total	100.0	100.0		
For how many years has this been a place where dru	g injectors can be found?	?		
Less than one year	5.2	7.9		
1 to 2 years	12.4	17.7		
3 to 5 years	19.0	19.8		
6 to 10 years	4.1	5.8		
More than 10 years	5.2	5.8		
Do not know	5.2	5.5		
Not Applicable	49.0	37.5		
Total	100.0	100.0		

Table B8 HIV Interventions at Site – Karaganda			
	2002 (N=443)	2003 (N=328)	
Have there ever been any AIDS prevention activities	at this place?		
Yes	6.3	9.8	
No	93.7	90.2	
Total	100.0	100.0	
Type of AIDS prevention activities as site			
Lectures and Suminars		2.4	
Pamphlets and Leaflets		6.1	
Posters		5.8	
Distribution of Syringes		3.4	
Condom Distribution		5.2	
In the last 12 months, how often have condoms been	available here?		
Always	24.8	38.4	
Sometimes	14.2	14.6	
Never	61.0	37.5	
Don't Know		9.5	
Total	100.0	100.0	
Condoms available at site on day of interview	100.0	100.0	
Yes, but one not seen	7.5	16.5	
Yes, and one was seen	18.5	35.7	
No	74.0	47.9	
Total	100.0	100.0	
	100.0	100.0	
Number of different brands of condoms available	1.0	7.0	
1	1.8	7.6	
2	5.6	7.3	
3	3.8	10.7	
4+	7.2	10.0	
Not Applicable	81.5	64.	
Total	100.0	100.0	
Brands of Condoms Seen	I		
Favorite		9.2	
Durex		13.7	
Pilotos		2.4	
Two to Tango		10.1	
Innotex		7.6	
Vizit		6.4	
Lifestyle		2.7	
Context		8.5	
Desire		14.3	
Gold Circle		1.5	
Indian / No Brand		22.9	
Other		7.3	
Is it possible for someone to find a condom within 10	minutes of leaving this p	place at night?	
Yes	77.9	79.0	
No	8.4	13.4	
Do not know	13.8	7.6	
Total	100.0	100.0	

Table B8					
HIV Interventions at S	Site – Karaganda				
2002 2003					
	(N=443)	(N=328)			
Willing to have AIDS educational programs at site*					
Yes	57.8	47.1			
No	16.7	52.9			
Not Applicable	25.5				
Total	100.0	100.0			
Willing to sell condoms at site					
Yes	51.9	63.7			
No	30.3	22.0			
Not Applicable	17.8	14.3			
Total	100.0	100.0			
Number of AIDS posters displayed					
0	96.6	94.8			
1	2.5	3.1			
2	0.7	0.6			
3+	0.2	1.5			
Total	100.0	100.0			
Number of AIDS brochures at site					
0	98.7	95.1			
1	0.9	0.6			
2+	0.5	4.2			
Total	100.0	100			
Number of condoms visible					
0	82.4	64.0			
1-9	7.9	3.1			
10-99	9.3	25.8			
100+	0.5	7.0			
Total	100.0	100.0			

<sup>\*</sup>Only persons who have authority to act on behalf of the site were asked this question in 2003 (N=121)

	Table C	1 — Soc	iodemo	graphic	Charac	teristics	of Indi	viduals	Socializ	ing at S	ites in k	Karagan	da			
	Rep	resenta	tive Sar	nple		Yo	uth			CSW an	d Client	s		ID	Us	
	Ma	les	Fem	ales	Ма	les	Fem	nales	Ма	les	Fem	nales	Ма	les	Fem	ales
	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003
	N=897	N=510	N=752	N=490	N=440	N=253	N=471	N=297	N=283	N=140	N=280	N=200	N=225	N=182	N=63	N=36
Age																
18-19	10.5	9.0	18.5	14.3	21.4	18.2	29.5	23.6	9.2	3.6	13.6	15.0	10.2	13.2	30.2	11.1
20-24	32.2	34.9	38.7	38.4	65.7	70.4	61.8	63.3	30.7	27.1	52.1	57.0	35.6	40.7	34.9	55.6
25-29	26.0	24.3	19.0	20.8	13.0	11.5	8.7	13.1	33.6	28.6	25.4	20.0	34.7	28.0	23.8	22.2
30-34	14.7	13.1	10.2	14.5	0.0	0.0	0.0	0.0	14.8	20.0	7.1	6.5	13.8	13.2	7.9	8.3
35-39	7.9	8.0	5.1	5.3	0.0	0.0	0.0	0.0	6.7	10.0	1.1	1.0	3.6	2.2	0.0	2.8
40-44	5.5	6.3	3.6	4.7	0.0	0.0	0.0	0.0	3.9	7.9	0.7	0.5	1.8	1.7	3.2	0.0
45-49	2.0	2.4	2.5	1.2	0.0	0.0	0.0	0.0	1.1	2.1	0.0	0.0	0.4	1.1	0.0	0.0
50+	1.2	2.0	2.4	8.0	0.0	0.0	0.0	0.0	0.0	0.7	0.0	0.0	0.0	0.0	0.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Current residence																
Karaganda	94.4	96.5	96.4	97.1	95.9	98.4	97.0	98.3	90.8	95.0	97.1	98.5	98.2	99.5	95.2	91.7
Karaganda Oblast	2.8	1.2	1.7	1.6	1.1	0.8	1.7	1.0	3.5	0.7	2.1	0.5	0.9	0.0	3.2	2.8
Other Oblasts of Kazakhstan	2.2	2.0	0.9	1.0	2.7	8.0	8.0	0.7	3.9	4.3	0.4	1.0	0.4	0.6	1.6	5.6
Elsewhere in Central Asia	0.4	0.0	0.4	0.0	0.0	0.0	0.2	0.0	1.8	0.0	0.4	0.0	0.4	0.0	0.0	0.0
Outside of Central Asia	0.1	0.4	0.5	0.2	0.2	0.0	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Distance live from place of i	nterviev	N											5			
10 minute walk or less		45.9		40.8		47.8		39.4		38.6		37.5		50.0	-	38.9
Further than 10 minute walk		54.1		59.2		52.2		60.6		61.4		62.5		50.0		61.1
Total		100.0		100.0		100.0		100.0		100.0		100.0		100.0	-	100.0
Years at residence																
< 1 year	3.2	1.8	3.7	2.67	3.0	1.6	3.2	2.7	3.2	1.4	2.5	3.0	1.3	1.1	3.2	0.0
1 year	1.7	1.0	0.8	0.6	2.0	0.4	1.1	0.3	1.1	2.9	0.7	0.5	1.8	0.6	0.0	2.8
2-4 years	6.7	5.5	8.0	8.6	6.8	3.6	8.5	8.1	7.1	6.4	5.7	6.5	5.3	2.2	4.8	11.1
5-10 years	14.7	15.9	14.9	15.5	9.5	16.2	14.0	11.8	13.8	16.4	13.6	16.5	10.2	12.1	17.5	8.3
>10 years	14.0	17.5	13.6	14.5	6.8	8.7	5.7	8.1	12.0	22.9	12.1	9.5	11.6	12.1	19.0	5.6
All of life	59.6	58.4	59.0	58.2	71.8	69.6	67.5	69.0	62.9	50.0	65.4	64.0	69.8	72.0	55.6	72.2
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Nights slept outside city in	past 3 m															
0	58.1	55.9	65.2	61.4	58.0	59.7	60.5	57.6	47.3	46.4	49.6	54.5	64.9	62.6	60.3	55.6
1 4	15.4	16.7	12.6	14.3	18.0	17.4	14.4	15.8	19.1	17.9	13.9	16.0	9.8	15.9	12.7	16.7
5 9	7.9	8.4	7.2	7.6	8.2	8.3	8.1	7.7	10.6	11.4	7.9	10.0	6.7	8.8	4.8	13.9
10 19	9.6	9.6	8.1	12.9	8.2	8.7	9.1	14.8	10.6	12.1	15.0	15.5	10.2	8.8	15.9	13.9
20 +	9.0	9.4	6.9	3.9	7.7	5.9	7.9	4.0	12.4	12.1	13.6	4.0	8.4	3.9	6.3	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

-	Table C	1 — Soc	iodemo	graphic	Charac	teristics	of Indi	viduals	Socializ	ing at S	ites in l	Karagan	da			
	Rep	resenta	tive San	nple		Yo	uth		(	CSW an	d Client	S		ID	Us	
	Ma	les	Fem	ales	Ma	les	Fem	ales	Ma	les	Fen	nales	Ma	les	Fem	ales
	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003
	N=897	N=510	N=752	N=490	N=440	N=253	N=471	N=297	N=283	N=140	N=280	N=200	N=225	N=182	N=63	N=36
Married or living in union	T		T				T				1					
Yes	41.5	42.2	31.9	33.1	20.5	21.7	17.0	13.1	36.4	44.3	4.6	6.0	23.6	20.9	14.3	11.1
No	58.5	57.8	68.1	66.9	79.5	78.3	83.0	86.9	63.6	55.7	95.4	94.0	76.4	79.1	85.7	88.9
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Educational Attainment	T		T				T				1					
Elementary (up to 7 forms) or none	0.7	0.4	1.1	0.4	0.7	0.8	1.3	0.3	0.4	0.7	1.1	0.5	2.2	1.1	6.3	0.0
Incomplete High (8-9 forms)	9.7	5.3	9.2	6.5	10.7	6.3	10.6	8.8	9.2	3.6	17.5	13.5	19.6	11.5	11.1	2.8
Public High	30.5	27.5	34.8	36.9	35.5	36.4	44.2	48.2	28.3	17.9	53.2	51.0	42.2	46.2	58.7	47.2
Special High (Technical, Pedagogical, Medical, Etc)	30.4	29.8	25.7	23.5	25.5	26.5	20.0	21.9	28.6	31.4	21.4	26.5	28.9	28.6	14.3	33.3
Incomplete Higher	13.5	14.7	14.0	10.6	18.9	19.0	18.3	11.8	15.2	15.7	5.4	6.0	4.4	8.8	6.3	8.3
Higher	15.2	22.4	15.3	22.0	8.9	11.1	5.7	9.1	18.4	30.7	1.4	2.5	2.7	3.9	3.2	8.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Employment Status																
Employed fulltime	50.8	51.0	35.8	36.1	37.0	30.8	22.5	19.2	49.8	55.7	3.9	5.5	15.1	18.7	11.1	13.9
Employed occasionally or parttime	20.6	17.7	13.7	18.4	21.6	23.3	14.2	21.2	26.5	18.6	18.6	29.0	36.9	25.3	30.2	13.9
Unemployed, looking for work	15.1	14.5	34.3	30.0	22.3	23.3	44.6	37.4	10.2	10.7	57.1	43.0	20.0	24.7	33.3	50.0
Unemployed, not looking for								_			_					
work	13.5	16.9	16.2	15.5	19.1	22.5	18.7	22.2	13.4	15.0	20.4	22.5	28.0	31.3	25.4	22.2
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Currently Students	100.0															
Yes	18.5	15.3	21.0	14.3	33.9	26.1	29.7	22.6	16.6	12.1	5.0	5.5	4.0	10.4	15.9	5.6
No	81.5	84.7	79.0	85.7	66.1	73.9	70.3	77.4	83.4	87.9	95.0	94.5	96.0	89.6	84.1	94.4
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Interviewer opinion of response	ndent is	s:					•									
IDU only	24.0	40.4	2.8	3.5	25.5	51.0	3.4	4.4	24.0	32.1	1.4	1.0	96.0	91.8	42.9	38.9
CSW only	0.0	0.0	29.7	35.5	0.0	0.0	36.7	47.8	0.0	0.0	83.2	79.5	0.0	0.0	9.5	16.7
Both IDU and CSW	0.8	1.0	4.7	7.1	1.1	1.2	4.0	9.4	1.8	0.7	14.6	13.5	2.7	0.6	47.6	36.1
Neither	75.3	58.6	62.9	53.9	73.9	47.8	55.8	38.4	74.2	67.1	0.7	6.0	1.3	7.7	0.0	8.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

	7	Table C2	— Site	Visiting	Behavi	ors of In	dividua	Is Socia	lizing at	t Sites ir	n Karaga	anda				
	Rep	oresenta	tive Sar	nple		Yo	uth		(	CSW and	d Client	S		ID	Us	
		iles		ales		les		ales		les		ales		les		ales
	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003
	N=897	N=510	N=752	N=490	N=440	N=253	N=471	N=297	N=283	N=140	N=280	N=200	N=225	N=182	N=63	N=36
Frequency of attendance a																
First time	7.7	6.7	9.0	4.1	5.0	4.4	7.6	2.4	10.6	9.3	2.5	1.5	4.0	1.7	11.1	2.8
< 1 time per month	5.1	5.7	6.3	5.9	4.1	3.6	4.9	4.4	6.0	4.3	1.4	5.0	3.6	4.4	3.2	5.6
1 time per month	5.4	6.3	4.4	5.9	4.3	4.7	2.8	5.1	5.3	4.3	0.7	2.5	4.9	2.8	1.6	0.0
2-3 times per month	6.7	7.7	7.8	8.0	6.8	5.9	7.6	8.4	11.3	15.0	6.8	5.0	4.4	3.3	3.2	5.6
One time per week	9.8	14.3	11.3	12.7	10.5	12.3	13.0	12.5	11.7	16.4	11.8	6.5	11.6	8.2	12.7	5.6
2-3 times per week	24.0	18.8	17.3	17.8	23.9	22.9	19.7	20.5	19.8	19.3	20.7	16.0	32.0	22.0	14.3	16.7
4-6 times per week	13.0	12.9	17.6	15.3	15.9	17.4	22.5	17.9	14.5	10.0	33.2	24.5	14.2	20.3	12.7	27.8
Everyday	28.3	27.7	26.3	30.4	29.5	28.9	21.9	29.0	20.8	21.4	22.9	39.0	25.3	37.4	41.3	36.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
In past seven days and nig	jhts, nu		days ca		ite?											
1		38.8		34.5		28.5		30.3		47.1		19.0		20.3		16.7
2		11.6		11.0		15.0		12.8		13.6		9.0		9.9		8.3
3		9.6		10.2		11.1		12.5		7.9		11.5		13.7		16.7
4		4.5		4.5		5.1		4.7		4.3		6.5		7.1		0.0
5		6.3		6.7		8.3		8.4		5.7		11.0		9.3		19.4
6		2.8		4.7		4.4		6.1		1.4		8.5		5.0		5.6
7		26.5		28.4		27.7		25.3		20.0		34.5		34.6		33.3
Total		100.0		100.0		100.0		100.0		100.0		100.0		100.0		100.0
When visited the site for the	ne first t	ime														
First time	7.7	6.7	9.0	4.1	5.0	4.4	7.6	2.4	10.6	9.3	2.5	1.5	4.0	1.7	11.1	2.8
In past 4 weeks	4.0	2.0	5.6	2.2	5.2	1.2	5.7	2.4	2.5	2.9	5.7	1.5	2.2	0.0	6.3	2.8
In past 2-6 months	9.4	10.4	12.1	15.3	11.8	7.9	12.3	15.8	9.5	11.4	16.8	17.5	7.6	6.6	14.3	8.3
In past 7-12 months	7.1	7.8	8.4	10.4	8.9	6.7	10.0	12.5	9.9	8.6	10.7	11.5	8.0	5.0	11.1	5.6
> 1 year ago	71.8	73.1	64.9	68.0	69.1	79.8	64.3	67.0	67.5	67.9	64.3	68.0	78.2	86.8	57.1	80.6
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
How came to site today																
Walked		59.8		55.1		66.8		53.9		45.7		52.5		72.0		61.1
By Car		19.0		19.2		13.0		19.5		33.6		24.0		6.6		19.4
By Public Transportation		21.2		25.7		20.2		26.6		20.7		23.5		21.4		19.4
Total		100.0		100.0		100.0		100.0		100.0		100.0		100.0		100.0
Why came to site today																
To drink alcohol		43.9		33.1		42.7		36.0		65.7		44.0		34.1		33.3
To meet a sexual partner		21.8		42.2		24.5		56.2		43.6		91.5		15.9		41.7
To socialize with friends		83.9		66.1		90.9		70.4		89.3		59.5		85.2		72.2

	7	able C2	— Site	Visiting	ng Behaviors of Individuals Social  Youth					t Sites ir	n Karaga	anda				
	Rep	resenta	tive Sar	nple		Yo	uth			CSW and	d Client	S		ID	Us	
	Ма	les	Fem	ales	Ма	les	Fem	ales	Ма	les	Fem	ales	Ма	les	Fem	ales
	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003
	N=897	N=510	N=752	N=490	N=440	N=253	N=471	N=297	N=283	N=140	N=280	N=200	N=225	N=182	N=63	N=36
Do you believe that people	come h	ere to n	neet nev	v sexua	partne	s?										
Yes	69.0	73.7	73.4	78.2	72.0	79.8	80.0	85.5	82.7	83.6	98.6	98.0	74.7	76.4	84.1	77.8
No	31.0	26.3	26.6	21.8	28.0	20.2	20.0	14.5	17.3	16.4	1.4	2.0	25.3	23.6	15.9	22.2
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Have you ever met a new s	exual p	artner a	t this sit	:e?												
Yes	29.8	35.5	37.9	46.5	32.3	43.9	45.6	61.3	48.8	52.9	89.6	88.5	38.2	37.4	55.6	61.1
No	70.2	64.5	62.1	53.5	67.7	56.1	54.4	38.7	51.2	47.1	10.4	11.5	61.8	62.6	44.4	38.9
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
When did you last attract a	new se	xual pa	rtner at	this site	?											
In past 24 hours ago	1.1	1.4	14.1	18.4	1.8	1.6	17.6	27.3	2.5	2.1	41.8	45.0	2.2	2.2	25.4	16.7
7 days ago	5.9	7.3	9.8	13.5	5.9	9.9	11.7	16.8	10.6	13.6	27.9	28.0	8.9	7.7	17.5	25.0
2-4 weeks ago	6.7	8.8	6.3	5.1	8.0	10.7	7.4	6.7	14.8	12.9	13.2	8.0	8.9	9.3	3.2	5.6
2-3 months ago	6.1	7.7	2.8	4.9	7.5	9.1	3.6	6.1	10.6	10.7	3.6	5.0	8.4	7.7	3.2	8.3
4-6 months ago	2.8	3.1	1.3	2.0	3.0	4.4	1.5	1.7	4.6	5.0	1.8	2.0	1.8	2.8	3.2	0.0
7-12 months ago	2.0	2.6	1.5	1.2	1.6	4.4	1.5	1.0	2.1	4.3	1.1	0.5	3.6	2.2	1.6	0.0
Over a year ago	5.1	4.7	2.1	1.4	4.5	4.0	2.3	1.7	3.5	4.3	0.4	0.0	4.4	5.5	1.6	5.6
Never	70.2	64.5	62.1	53.5	67.7	56.1	54.4	38.7	51.2	47.1	10.4	11.5	61.8	62.6	44.4	38.9
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Use condom with last new	partner	from he														
Yes	14.0	20.4	28.3	37.6	17.5	26.9	35.9	49.8	29.0	35.7	76.1	76.0	14.2	11.5	38.1	38.9
No	8.4	11.8	4.4	7.1	6.4	13.8	4.5	8.4	8.1	12.1	5.7	10.0	10.7	19.2	4.8	13.9
Don't remember	7.4	3.3	5.2	1.8	8.4	3.2	5.3	3.0	11.7	5.0	7.9	2.5	13.3	6.6	12.7	8.3
No partner from here	70.2	64.5	62.1	53.5	67.7	56.1	54.4	38.7	51.2	47.1	10.4	11.5	61.8	62.6	44.4	38.9
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

			ortoor A	. a a u i a i t i	on of In		ble C3	iowad a	t Citoo i	n Karası	anda					
	Pon	resenta		•	on or m	dividual Yo		ieweu a		CSW and				ID	le.	
		les		ales	Ma	les		ales		les		ales	Ma	les		ales
	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003
	N=897	N=510			N=440				N=283	N=140			N=225	N=182	N=63	N=36
Number of partners in past			11 102		111				11 200		111					
0	14.6	12.6	14.5	11.2	13.4	11.9	13.4	10.1	3.2	3.6	0.4	0.0	17.8	21.4	3.2	8.3
1	42.7	38.0	41.4	33.1	40.9	34.8	36.5	22.6	21.9	18.6	0.4	0.5	28.9	33.0	14.3	16.7
2	20.5	23.5	8.9	11.2	22.7	27.7	9.1	8.8	32.5	25.0	2.5	2.0	25.8	24.2	12.7	19.4
3	10.8	14.3	5.1	3.1	11.6	15.8	4.0	3.0	19.4	25.7	5.7	2.0	13.3	14.3	11.1	2.8
4-9	10.1	11.1	9.2	8.4	10.0	9.5	9.6	10.1	21.2	25.7	24.6	14.5	13.8	7.1	27.0	11.1
10-14	0.8	0.4	7.3	8.4	1.1	0.4	8.7	10.8	0.7	1.4	23.9	20.5	0.4	0.0	12.7	11.1
15+	0.4	0.0	13.7	24.7	0.2	0.0	18.7	34.7	1.1	0.0	42.5	60.5	0.0	0.0	19.0	30.6
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of new partners in	past 4	weeks														
0	57.2	49.0	56.3	45.1	50.9	43.1	50.1	32.3	26.1	22.9	1.4	1.5	50.2	48.9	22.2	33.3
1	20.4	25.5	8.8	9.6	24.3	28.5	8.7	7.1	35.7	30.7	1.4	1.0	25.3	26.4	12.7	11.1
2	12.0	14.9	4.1	3.7	13.6	18.6	4.5	4.0	17.0	25.0	4.3	1.5	12.9	15.4	6.3	2.8
3	4.9	4.9	3.1	3.1	5.5	5.1	2.8	4.0	10.2	7.1	7.5	3.0	5.8	6.6	7.9	5.6
4-9	4.9	5.7	11.4	9.0	5.2	4.7	13.0	10.8	9.5	14.3	33.2	20.5	5.3	2.8	25.4	8.3
10-14	0.2	0.0	7.7	8.2	0.2	0.0	8.9	11.5	0.7	0.0	23.6	20.0	0.4	0.0	14.3	11.1
15+	0.3	0.0	8.6	21.4	0.2	0.0	12.1	30.3	0.7	0.0	28.6	52.5	0.0	0.0	11.1	27.8
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of partners in past	t 12 mor	nths														
0	3.0	1.6	6.5	3.5	3.0	0.0	6.4	3.7	0.4	0.7	0.0	0.0	4.4	2.8	0.0	0.0
1	27.6	22.4	35.2	30.4	23.2	17.4	28.7	18.2	3.9	4.3	0.4	0.0	20.4	21.4	9.5	11.1
2	13.8	11.4	10.0	6.7	13.9	10.7	10.2	4.7	8.5	7.9	0.4	0.0	8.9	15.9	6.3	8.3
3	8.9	7.3	6.4	5.5	9.3	9.1	5.9	4.7	9.2	4.3	0.0	0.0	7.1	8.8	0.0	5.6
4-9	27.5	34.1	8.4	10.6	30.5	36.8	9.8	10.8	41.3	40.7	2.9	1.0	32.4	33.5	17.5	16.7
10-14	9.7	9.8	3.1	1.8	11.4	12.7	3.0	2.4	20.1	17.1	3.2	0.5	14.7	8.8	11.1	2.8
15+	9.4	13.5	30.5	41.4	8.9	13.4	36.1	55.6	16.6	25.0	93.2	98.5	12.0	8.8	55.6	55.6
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Table C3 Partner Acquisition of Individuals Interviewed at Sites in Karaganda Representative Sample Youth CSW and Clients IDUs Males Females Males Females Males Females Females																
	Ren			•	on of in			iewed a				<u> </u>		ID	Us	
					Ma			ales					Ma			ales
	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003
	N=897					N=253		N=297	N=283							N=36
Number of new partners in							I									
0	27.6	21.6	39.2	32.2	22.5	13.8	32.9	19.9	3.9	5.0	0.4	0.0	19.1	19.8	9.5	8.3
1	14.4	9.2	12.2	7.8	12.7	7.9	11.9	5.1	6.4	5.7	0.4	0.0	12.4	11.0	4.8	8.3
2	9.7	11.4	6.3	5.5	11.6	13.8	6.2	5.7	11.0	7.1	0.0	0.0	9.3	15.4	1.6	8.3
3	11.0	8.8	3.9	3.5	11.4	9.9	4.0	3.7	13.8	5.0	0.4	0.5	11.6	11.0	6.3	11.1
4-9	21.3	28.0	6.3	8.4	25.2	31.6	7.4	8.4	36.4	38.6	3.9	0.5	26.7	28.0	20.6	5.6
10-14	7.6	7.8	2.1	1.6	8.2	9.9	1.7	2.4	13.8	14.3	2.5	1.0	10.2	6.0	3.2	8.3
15+	8.4	13.1	30.1	41.0	8.4	13.0	35.9	54.9	14.8	24.3	92.5	98.0	10.7	8.8	54.0	50.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Youngest person had sex	with in t	he past	12 mon	ths was												
10+ years younger		20.6		3.3		0.8		0.0		35.7		5.5		14.3		5.6
5-9 years younger		30.2		18.6		28.9		20.9		42.9		35.0		27.5		22.2
1-4 years younger		40.2		25.9		59.7		32.7		17.1		39.0		47.8		36.1
Same age		4.5		9.4		7.1		9.8		2.9		4.5		5.5		16.7
1-4 years older		2.4		28.4		3.2		23.2		0.7		9.5		1.7		13.9
5-9 years older		0.4		9.0		0.4		7.7		0.0		4.0		0.6		5.6
10+ years older		0.2		2.0		0.0		2.0		0.0		2.5		0.0		0.0
No partners in past 12 months		1.6		3.5		0.0		3.7		0.7		0.0		2.8		0.0
Total		100.0		100.0		100.0		100.0		100.0		100.0		100.0		100.0
Oldest person had sex witl	n in the	past 12	months	was	ı											
10+ years younger		1.8		0.4		0.0		0.0		1.4		0.0		1.7		0.0
5-9 years younger		10.6		0.4		2.4		0.3		11.4		0.0		6.6		2.8
1-4 years younger		34.1		2.9		25.7		1.0		33.6		0.5		33.5		0.0
Same age		10.8		4.1		15.4		2.7		3.6		0.0		12.1		5.6
1-4 years older		23.3		27.4		30.0		19.2		27.1		4.0		23.1		13.9
5-9 years older		11.8		15.9		17.4		15.5		15.0		4.5		15.4		30.6
10+ years older		6.1		45.5		9.1		57.6		7.1		91.0		5.0		47.2
No partners in past 12		1.6		3.5		0.0		3.7		0.7		0.0		2.8		0.0
months																
Total		100.0		100.0		100.0		100.0		100.0		100.0		100.0		100.0
Has regular long-term sexu	ual partr	ner(s)														
Yes	71.0	68.6	63.6	61.4	60.9	58.1	57.5	46.8	64.3	67.9	36.4	34.5	58.7	53.9	65.1	50.0
No	29.0	31.4	36.4	38.6	39.1	41.9	42.5	53.2	35.7	32.1	63.6	65.5	41.3	46.2	34.9	50.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

		Р	artner A	cquisiti	on of In	Tal dividual	ble C3 s Interv	iewed a	t Sites i	n Karaga	anda					
	Representative Sample Youth CSW and Clients															
	Ma	Males Females Males Females Females												les	Females	
	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003
	N=897	N=510	N=752	N=490	N=440	N=253	N=471	N=297	N=283	N=140	N=280	N=200	N=225	N=182	N=63	N=36
Men who have had sex wit	h a man	in past	4 weeks	3												
Yes	1.2	3.9	0.0	0.0	1.6	3.6	0.0	0.0	2.1	7.1	0.0	0.0	4.4	5.0	0.0	0.0
No	97.8	95.9	0.0	0.0	97.5	96.4	0.0	0.0	96.5	92.1	0.0	0.0	92.4	94.5	0.0	0.0
Don't remember	1.0	0.2	0.0	0.0	0.9	0.0	0.0	0.0	1.4	0.7	0.0	0.0	3.1	0.6	0.0	0.0
Not applicable	0.0	0.0	100.0	100.0	0.0	0.0	100.0	100.0	0.0	0.0	100.0	100.0	0.0	0.0	100.0	100.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

	Social	izing at	Sites in	Karaga	nda	IDUs										
	Repre	sentativ	ve Samp	le	_	Youth	ŋ		CS	SW and	Clients			IDU	Js	
	Ма	les	Fen	nales	Ma	ales	Fen	nales	Ma	iles	Fem	ales	Ма	les	Fem	ales
	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003
	N=897	N=510	N=752	N=490	N=440	N=253	N=471	N=297	N=283	N=140	N=280	N=200	N=225	N=182	N=63	N=36
Last time used a condom																
In past 24 hours	9.6	8.4	24.9	29.4	11.4	9.1	31.8	39.7	15.5	17.9	68.2	61.0	6.2	5.0	38.1	22.2
In past week	26.9	29.4	21.9	25.5	33.2	36.8	24.4	26.6	39.2	35.0	21.4	31.0	22.7	22.5	23.8	38.9
In past 4 weeks	11.4	13.1	6.8	8.2	12.5	14.2	6.6	9.1	17.0	15.0	2.9	4.5	13.8	16.5	6.3	13.9
In past 2-6 months	16.5	13.7	8.8	5.5	19.3	15.4	8.1	5.4	13.8	13.6	2.5	1.0	20.0	13.7	14.3	8.3
In past 7-12 months	3.3	2.9	3.3	1.6	2.7	3.2	3.0	1.7	2.1	1.4	1.1	0.5	8.9	4.4	1.6	0.0
Over one year ago	14.6	14.9	12.6	12.2	8.4	10.7	6.8	7.1	6.4	8.6	1.1	0.5	13.3	18.7	4.8	13.9
Never used a condom	17.7	17.5	21.7	17.6	12.5	10.7	19.3	10.4	6.0	8.6	2.9	1.5	15.1	19.2	11.1	2.8
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Where got last condom used																
Grocery store	10.8	14.3	7.2	8.8	10.5	14.6	5.9	9.8	9.9	20.0	10.7	12.5	7.6	11.0	9.5	5.6
Pharmacy	25.2	28.0	22.1	23.3	28.9	27.7	23.4	24.2	23.0	37.1	27.1	29.5	13.8	18.1	23.8	19.4
Kiosk	25.8	19.6	10.9	10.8	28.6	23.3	11.7	13.5	34.6	16.4	20.4	20.5	22.2	21.4	9.5	11.1
Partner had condom	9.9	10.2	28.6	33.3	10.5	11.1	28.7	34.7	13.8	10.7	21.1	30.5	19.6	15.9	31.7	47.2
Friend	4.3	5.7	3.1	3.1	5.5	7.1	3.6	4.0	7.8	3.6	1.8	1.5	7.1	6.6	1.6	0.0
Received free of charge	2.7	2.4	4.9	1.8	1.6	2.8	6.6	2.0	1.4	1.4	14.6	3.0	8.4	5.0	11.1	11.1
Bar, Nightclub, Restaurant, Hotel		8.0		0.0		8.0		0.0		0.0		0.0		0.0		0.0
Other	3.6	1.6	1.6	1.4	2.0	2.0	8.0	1.4	3.5	0.7	1.4	1.0	6.2	1.1	1.6	2.8
Never used a condom	17.7	17.5	21.7	17.6	12.5	10.7	19.3	10.4	6.0	1.4	2.9	1.5	15.1	1.7	11.1	2.8
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

	Tab	le C4 —	Reporte	ed Con	dom Us	e by Ind	lividuals	Sociali	izing at	Sites in	Karaga	nda				
	Repre	esentativ	<mark>/e Samp</mark>	le		Youth	ı		CS	W and	Clients			IDU		
	Ma	les	Fem	ales	Ma	iles	Fen	nales	Ma	les	Fem	ales	Ma	les	Fem	nales
	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003
	N=897	N=510	N=752	N=490	N=440	N=253	N=471	N=297	N=283	N=140	N=280	N=200	N=225	N=182	N=63	N=36
What was the brand of the las	st condo		<b> </b> ?													
Favorite		2.6		4.1		2.8		4.7		2.9		6.5		1.1		2.8
Durex		10.4		10.2		11.9		10.8		14.3		16.0		7.7		0.0
Pilotos		8.0		1.0		8.0		1.4		1.4		2.0		0.6		0.0
Two to Tango		4.5		3.1		5.1		2.0		7.1		3.0		3.3		2.8
Innotex		2.2		3.3		2.4		2.7		3.6		2.5		0.0		0.0
Vizit		1.8		1.2		3.2		1.4		2.1		1.5		0.0		0.0
Lifestyle		2.9		0.8		3.2		1.0		4.3		1.5		2.2		0.0
Context		6.9		7.6		6.3		8.4		12.1		11.0		2.2		11.1
Desire		4.3		4.9		6.7		6.1		7.1		8.5		4.4		5.6
Gold Circle		0.6		0.6		0.4		1.0		1.4		1.0		0.0		0.0
Indian/No Brand		14.1		11.2		17.0		13.8		12.9		19.0		18.1		11.1
Other		3.5		2.2		3.6		2.7		0.7		4.5		5.0		11.1
Don't Remember/Don't Know		28.0		32.2		26.1		33.7		21.4		21.5		36.3		52.8
Never used a condom		17.5		17.6		10.7		10.4		1.4		1.5		1.7		2.8
Total		100.0		100.0		100.0		100.0		100.0		100.0		100.0		100.0
Has condom with them at tim	e of inte															
Yes, condom not seen	3.9	3.1	5.9	2.5	3.9	4.0	7.4	3.0	8.1	5.0	16.4	4.0	3.6	2.8	9.5	0.0
Yes, condom seen	10.0	26.9	16.1	30.6	13.9	29.6	21.9	39.1	15.5	45.7	44.3	62.5	8.9	19.8	20.6	25.0
No	86.1	70.0	78.1	66.9	82.3	66.4	70.7	57.9	76.3	49.3	39.3	33.5	87.6	77.4	69.8	75.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Brand of condom seen?		I		L												
Favorite		1.2		3.1		1.2		4.4		2.9		7.0		1.1		5.6
Durex		5.9		9.6		5.5		12.5		12.9		21.0		3.9		0.0
Pilotos		0.2		0.8		0.0		1.0		0.7		2.0		0.0		0.0
Two to Tango		2.6		2.2		1.6		2.7		5.7		5.0		1.1		0.0
Innotex		1.8		2.5		2.0		2.7		4.3		5.0		0.0		2.8
Vizit		0.8		4.5		0.8		6.7		1.4		9.0		0.0		2.8
Lifestyle		1.2		0.6		1.2		0.7		2.1		1.5		0.6		2.8
Context		4.9		5.9		4.7		7.4		10.0		11.5		2.8		5.6
Desire		6.3		8.2		8.3		11.1		10.0		16.5		4.4		5.6
Gold Circle		0.4		0.4		0.4		0.7		1.4		0.5		0.0		0.0
Indian/No Brand		5.1		11.4		5.5		15.5		7.9		25.0		4.4		11.1
Other		2.8		1.0		2.8		1.7		2.1		2.5		3.3		2.8
Condom not seen		3.1		2.5		4.0		3.0		5.0		4.0		2.8		0.0
No condom at interview		70.0		66.9		66.4		57.9		49.3		33.5		77.5		75.0

	Tab	le C4 —	Report	ed Con	dom Us	e by Ind	ividuals	Sociali	izing at	Sites in	Karaga	nda				
	Repre	esentativ	<mark>/e Samp</mark>	le		Youth	וַ		CS	SW and	Clients			IDU	Js	
	Ma	iles	Fem	nales	Ma	ales	Fen	nales	Ma	iles		nales	Ma	les	Fem	nales
	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003
	N=897	N=510	N=752	N=490	N=440	N=253	N=471	N=297	N=283	N=140	N=280	N=200	N=225	N=182	N=63	N=36
In past 4 weeks, how often us	sed con		ith new		partners											
Always	ı <del></del>	23.5		31.4		25.7		41.4		47.9		64.0		14.8		30.6
Sometimes		19.2		20.4		23.3		24.9		22.9		33.0		23.6		33.3
Never		8.2		3.1		7.9		1.5		6.4		1.5		12.6		2.8
No new partners in last 4 weeks		49.0		45.1		43.1		32.3		22.9		1.5		48.9		33.3
Total		100.0		100.0		100.0		100.0		100.0		100.0		100.0		100.0
Condom used with last new p	partner i	in past 4	weeks													
Yes	27.6	33.9	35.5	43.5	32.0	38.7	42.9	55.6	54.1	62.1	88.6	86.5	26.2	24.2	55.6	47.2
No	15.2	17.1	8.2	11.4	17.0	18.2	7.0	12.1	19.8	15.0	10.0	12.0	23.6	26.9	22.2	19.4
No new parnter in last 4 weeks	57.2	49.0	56.3	45.1	50.9	43.1	50.1	32.3	26.1	22.9	1.4	1.5	50.2	48.9	22.2	33.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Why did not use condom with																
Partner protested		1.0		3.5		0.8		4.7		2.9		5.5		1.7		2.8
Do not like condoms		8.2		2.0		7.9		1.7		7.9		1.5		13.2		5.6
Trust partner		2.4		2.0		1.6		1.7		1.4		0.0		1.7		5.6
Afraid partner suspects		0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0
Another contraceptive		0.4		2.9		0.0		2.0		0.0		1.5		1.1		2.8
Condoms too expensive		1.4		0.4		2.0		0.0		2.9		1.0		2.2		0.0
Did not have condoms at hand		7.5		2.9		10.3		4.0		3.6		5.0		13.7		8.3
Condoms do not protect against STDs/AIDS		0.4		0.0		8.0		0.0		1.4		0.0		1.1		0.0
Condoms low quality / condoms break		1.0		8.0		1.6		0.3		1.4		0.5		2.8		2.8
Used a condom with last new partner		33.9		43.5		38.7		55.6		62.1		86.5		24.2		47.2
No new partner in last 4 weeks		49.0		45.1		43.1		32.3		22.9		1.5		48.9		33.3
Total		100.0		100.0		100.0		100.0		100.0		100.0		100.0		100.0
Condom used at last sex with				100.0		100.0	_ <b></b>	100.0	_ <b></b>	100.0		100.0	_ <del></del>	100.0	_ <b></b>	100.0
Yes	23.6	17.8	21.5	19.0	28.4	21.0	24.6	18.9	25.8	14.3	23.6	19.0	17.8	12.6	33.3	11.1
No	47.4	50.8	42.0	42.5	32.5	37.2	32.9	28.0	38.5	53.6	12.9	15.5	40.9	41.2	31.7	38.9
No regular partner	29.0	31.4	36.4	38.6	39.1	41.9	42.5	53.2	35.7	32.1	63.6	65.5	41.3	46.2	34.9	50.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
1 0 (01	100.0	.00.0	100.0	.00.0	.00.0	.00.0	.00.0	.00.0	.00.0	.00.0	.00.0	.00.0	.00.0	.00.0	.00.0	

	Tab	le C4 —	Reporte	ed Cond	dom Use	by Ind	ividuals	Sociali	zing at	Sites in	Karaga	nda				
	Repre	sentativ	e Samp	le		Youth	)		CS	SW and	Clients			IDU	Js	
	Ma	les	Fem	ales	Ma	les	Fem	ales	Ma	les	Fem	nales	Ма	les	Fem	nales
	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003
	N=897	N=510	N=752	N=490	N=440	N=253	N=471	N=297	N=283	N=140	N=280	N=200	N=225	N=182	N=63	N=36
Ever had a condom break in	past 12	months														
Yes		13.5		21.2		15.4		28.6		23.6		38.5		10.4		13.9
No		59.2		50.6		67.2		54.2		63.6		59.5		57.1		69.4
Does not use condoms		25.7		24.7		17.4		13.5		12.1		2.0		29.7		16.7
No partners in past 12		1.6		3.5		0.0		3.7		0.7		0.0		2.8		0.0
months						0.0								2.0		
Total		100.0		100.0		100.0		100.0		100.0		100.0		100.0		100.0
Respondent's opinion for a re	easonab		(in Teng		condo											
0 Tenge		13.1		13.5		15.0		12.5		5.7		14.5		21.4		33.3
1-10 Tenge		28.4		27.4		29.6		30.0		26.4		30.5		35.7		22.2
11-20 Tenge		16.3		21.6		18.2		21.6		16.4		19.5		15.9		13.9
21-30 Tenge		9.2		10.0		9.5		8.8		12.1		9.0		9.3		5.6
31-40 Tenge		4.7		3.7		4.0		3.0		4.3		2.0		4.4		0.0
41-50 Tenge		11.4		10.2		11.5		10.1		13.6		9.0		7.7		13.9
51-100 Tenge		9.2		10.0		6.7		10.1		13.6		11.0		5.0		8.3
101-200 Tenge		6.7		3.1		5.1		3.0		6.4		3.5		0.6		2.8
>200 Tenge		1.0		0.6		0.4		1.0		1.4		1.0		0.0		0.0
Total		100.0		100.0		100.0		100.0		100.0		100.0		100.0		100.0
Respondent's opinion about	efficacy	of cond	loms in	prevent	ing STI	s includ	ing HIV						_			
Very effective		40.4		42.7		41.5		44.1		48.6		46.0		30.8		33.3
Somewhat effective		36.9		34.5		37.6		37.0		35.0		41.0		47.3		36.1
Not very effective		15.5		15.1		15.8		13.8		11.4		10.0		14.3		25.0
Not effective at all		2.8		2.0		1.2		1.0		0.7		1.0		2.8		5.6
Don't Know		4.5		5.7		4.0		4.0		4.3		2.0		5.0		0.0
Total		100.0		100.0		100.0		100.0		100.0		100.0		100.0		100.0

							le C5									
Know			<u>//AIDS T</u> tive San		ssion ar	nd Preve You		f Individ		cializino CSW and			aganda 	ID	Us	
	Ma		Fem	•	Ма	les	Fem	ales	Ма	les	Fem	nales	Ма	les	Fem	ales
	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003
			N=752		N=440	N=253	N=471	N=297	N=283	N=140	N=280	N=200	N=225	N=182	N=63	N=36
Respondent's opinion of HI\	//AIDS p	roblem	in Kara	ganda							5		-		_	
Serious Problem		80.4		79.4		82.6		78.5		78.6		82.0		86.3		86.1
Somewhat of a Problem		12.2		13.5		12.3		14.5		12.1		12.5		9.3		13.9
Not a Problem at All		1.6		1.0		8.0		1.4		1.4		1.0		1.7		0.0
Don't know		5.9		6.1		4.4		5.7		7.9		4.5		2.8		0.0
Total	-	100.0		100.0		100.0		100.0		100.0		100.0		100.0		100.0
Respondent's opinion of ho	w likely	he/she	is of co		g the HI		/irus				5		-		_	
Very likely		16.7		15.5		18.6		18.2		19.3		29.5		30.2		22.2
Somewhat likely		28.4		27.1		29.3		34.3		35.7		41.5		39.6		27.8
Not very likely		24.5		24.5		23.3		22.2		27.1		13.5		12.1		16.7
No risk		19.6		22.2		15.8		13.8		12.1		5.5		7.7		11.1
Don't know		10.8		10.6		13.0		11.5		5.7		10.0		10.4		22.2
Total		100.0		100.0		100.0		100.0		100.0		100.0		100.0		100.0
Respondent Believes It Is Po	ossible	to Beco	me Infed	cted wit	h HIV/A	DS thro	ugh									
Sexual contact without co	ondom															
Yes	97.1	99.0	98.5	98.4	98.0	99.2	98.1	99.3	98.6	99.3	98.2	98.0	98.7	98.4	96.8	100.0
No	0.4	0.8	0.3	0.4	0.9	0.4	0.4	0.0	0.4	0.7	0.4	0.5	0.0	1.7	1.6	0.0
Don't know	2.5	0.2	1.2	1.2	1.1	0.4	1.5	0.7	1.1	0.0	1.4	1.5	1.3	0.0	1.6	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Injecting drugs with share	ed syrin	ge			•											
Yes	97.0	98.6	98.3	98.2	97.3	98.8	98.7	98.7	96.8	98.6	97.9	97.5	93.8	98.9	90.5	100.0
No	0.7	0.4	0.5	0.4	0.9	0.0	0.2	0.3	1.1	0.7	0.7	0.5	2.7	0.6	3.2	0.0
Don't know	2.3	1.0	1.2	1.4	1.8	1.2	1.1	1.0	2.1	0.7	1.4	2.0	3.6	0.6	6.3	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Eating from common dish	1				•											
Yes	11.7	9.2	11.4	9.4	13.0	9.9	11.3	9.8	11.7	10.7	11.4	11.0	7.6	6.6	15.9	2.8
No	70.2	83.1	71.4	78.4	67.7	80.6	70.1	76.1	71.4	82.9	72.1	70.0	75.6	84.1	63.5	72.2
Don't know	18.1	7.7	17.2	12.2	19.3	9.5	18.7	14.1	17.0	6.4	16.4	19.0	16.9	9.3	20.6	25.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Swimming in common po																
Yes	11.4	11.4	13.8	13.7	12.5	12.7	14.0	13.5	11.0	12.1	10.0	12.0	11.6	13.2	14.3	8.3
No	64.0	73.9	60.4	69.2	61.6	71.5	58.4	68.4	66.1	71.4	61.4	68.5	68.9	72.0	54.0	69.4
Don't know	24.6	14.7	25.8	17.1	25.9	15.8	27.6	18.2	23.0	16.4	28.6	19.5	19.6	14.8	31.7	22.2
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

							le C5									
Know		bout HI\			ssion ar			f Individ					aganda			
	Rep	resenta	tive Sar	nple			uth			CSW and	d Client	S		ID		
	Ma	ales		nales		les		ales		les		ales		les		nales
	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003
Insect bite	N=897	N=510	N=752	N=490	N=440	N=253	N=4/1	N=297	N=283	N=140	N=280	N=200	N=225	N=182	N=63	N=36
Yes	23.3	16.1	22.6	18.8	26.1	16.2	24.8	20.2	25.1	17.9	21.1	20.5	23.6	15.4	28.6	19.4
No	45.3	65.9	46.0	59.8	41.4	64.4	43.3	56.6	46.6	67.1	41.8	51.0	46.2	61.0	38.1	61.1
								23.2	28.3							
Don't know	31.4	18.0	31.4	21.4	32.5	19.4	31.8			15.0	37.1	28.5	30.2	23.6	33.3	19.4
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Handshake	_				1		1				ı				1	
Yes	6.2	1.2	5.5	2.0	7.0	2.0	4.9	2.4	6.0	0.7	5.0	3.0	7.1	1.1	9.5	5.6
No	84.4	95.5	83.5	92.9	84.8	95.3	84.9	92.6	86.6	95.0	85.0	89.5	85.3	96.2	81.0	88.9
Don't know	9.4	3.3	11.0	5.1	8.2	2.8	10.2	5.1	7.4	4.3	10.0	7.5	7.6	2.8	9.5	5.6
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
People can avoid of getting	HIV by:															
Using condoms	80.2	81.8	83.0	84.5	85.5	84.6	87.0	90.2	82.7	90.0	93.9	95.5	81.3	79.7	77.8	86.1
Having fewer partners	17.1	15.7	11.7	15.1	16.8	17.4	11.3	13.8	12.7	13.6	5.7	9.0	12.9	15.9	14.3	13.9
Both partners have no other	40.0	40.7	04.0	40.0	44.0	0.0	00.0	40.4	0.4	40.7	4.0	0.5	0.7	0.0	40.7	0.0
partner	13.3	16.7	21.0	18.8	11.8	9.9	20.8	12.1	6.4	10.7	1.8	0.5	6.7	8.2	12.7	2.8
No casual sex	36.9	36.9	34.0	33.9	33.2	34.4	30.4	26.9	33.6	20.0	9.6	11.5	20.0	30.2	27.0	22.2
No sex at all	1.2	1.2	2.0	1.0	1.1	0.8	1.3	1.4	1.1	0.0	2.1	1.0	2.2	1.1	4.8	0.0
No commercial sex	15.7	12.8	13.0	14.3	17.0	12.7	11.7	9.4	13.4	7.1	2.5	5.5	12.4	12.1	6.3	13.9
Avoid sharing needles	60.8	69.8	59.7	65.1	61.6	69.6	64.8	68.0	66.1	72.1	70.7	69.0	83.6	82.4	76.2	83.3
Avoid blood transfusions	17.6	16.1	19.3	20.6	17.3	17.4	20.0	24.6	23.0	20.0	25.4	30.5	23.6	22.0	15.9	22.2
Others	7.5	0.0	6.6	0.0	7.3	0.0	5.1	0.0	6.4	0.0	3.9	0.0	4.9	0.0	0.0	0.0
Don't know any	2.3	1.4	2.0	2.2	1.8	1.6	2.1	2.0	1.8	2.1	1.8	4.0	2.2	2.2	7.9	2.8
A person who looks healthy		infecte							110							
Yes	70.8	79.0	73.3	75.1	69.1	80.2	73.2	72.1	66.8	75.0	73.9	75.5	72.9	80.8	55.6	80.6
No	8.9	9.2	7.7	9.8	10.0	8.7	7.4	10.1	9.2	12.1	6.1	6.5	9.8	7.7	9.5	8.3
Don't know	20.3	11.8	19.0	15.1	20.9	11.1	19.3	17.9	24.0	12.9	20.0	18.0	17.3	11.5	34.9	11.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
															.00.0	

		IIV/ E.d		d 1111/1	Taatina		le C6	Casiali-	.i.a.a. a.t C	itaa in k	<b></b>	<b></b>				
			tive San		resting	for Indi		Socializ		CSW an				ID	Us	
		les		ales	Ma	les		ales		les		nales	Ма	les		ales
	2002 N=897	2003 N=510	2002 N=752	2003 N=490	2002 N=440	2003 N=253	2002 N=471	2003 N=297	2002 N=283	2003 N=140	2002 N=280	2003 N=200	2002 N=225	2003 N=182	2002 N=63	2003 N=36
Attended AIDS educational							I									
Yes	9.1		12.2		10.5		12.3		6.0		8.9		14.7		17.5	
No	90.9		87.8		89.5		87.7		94.0		91.1		85.3		82.5	
Total	100.0		100.0		100.0		100.0		100.0		100.0		100.0		100.0	
Have you heard or seen any	informa	ation ab	out HIV	AIDS in	the last	t 12 mor	nths?									
Yes		82.9		92.5		85.4		92.9		86.4		95.5		83.5		88.9
No		17.1		7.6		14.6		7.1		13.6		4.5		16.5		11.1
Total		100.0		100.0		100.0		100.0		100.0		100.0		100.0		100.0
From what source did you re	eceive t	his info	rmation	?												
TV		70.8		78.6		74.7		77.4		77.9		79.0		68.7		69.4
Radio		39.6		46.7		37.9		44.8		44.3		41.5		30.2		30.6
Newspapers/Magazines		60.2		70.6		58.1		67.3		65.7		66.5		52.8		63.9
Leaflets/Posters		44.1		56.9		43.5		57.6		50.7		50.0		39.0		63.9
Friend or relative		35.5		46.3		36.8		49.2		42.9		57.0		38.5		33.3
Doctor/health worker		29.6		42.5		29.3		42.8		31.4		49.5		40.1		55.6
In education places (school)		13.5		20.0		18.2		23.2		11.4		10.5		7.7		8.3
Outreach Worker		6.5		8.2		7.1		9.1		2.1		11.5		9.9		19.4
Other		2.6		3.7		2.0		3.4		3.6		4.0		0.6		0.0
Where can a person in Kara	ganda h		od draw	n from	the vien	for an I	HIV test	?								
Center of AIDS		61.2		58.8		60.1		59.6		62.9		69.0		74.7		19.4
Venerological/ Dermatological Dispensary		35.5		38.4		37.2		40.4		48.6		46.5		35.7		25.0
Clinic / Hospital		55.9		57.6		58.5		55.6		55.0		62.0		55.5		47.2
Don't Know		7.1		6.5		5.9		7.4		5.0		3.5		2.8		5.6
Other		5.9		4.1		4.7		2.7		5.0		2.5		5.5		100.0
Number of times been teste	d for HI		t 12 moi		<u>l</u>		<u>l</u>		ı		l		l			
0	61.5	61.0	55.3	61.2	63.4	60.1	54.1	62.6	54.8	64.3	31.1	43.0	45.3	39.6	38.1	41.7
1	31.2	29.2	33.6	29.2	31.6	30.8	34.6	27.6	36.4	22.9	44.6	37.5	40.4	44.5	31.7	33.3
2	5.1	6.9	6.9	4.5	3.2	6.3	6.4	5.1	7.1	7.1	12.9	8.5	9.8	11.0	15.9	5.6
3 5	1.8	2.6	3.9	4.1	1.6	2.4	4.7	4.0	1.8	5.0	11.1	8.5	4.0	5.0	12.7	13.9
6+	0.3	0.4	0.3	1.0	0.2	0.4	0.2	0.7	0.0	0.7	0.4	2.5	0.4	0.0	1.6	5.6
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

						Tab	le C6									
		HIV Edu	cation a	nd HIV	Testing	for Indi	viduals	Socializ	ing at S	ites in K	Karagan	da				
	Rep	resenta	tive Sar	nple		Yo	uth		(	CSW and	d Client	S		ID	Us	
	Ma	les	Fem	ales	Ma	les	Fem	ales	Ма	les	Fem	ales	Ma	iles	Fem	nales
	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003
	N=897	N=510	N=752	N=490	N=440	N=253	N=471	N=297	N=283	N=140	N=280	N=200	N=225	N=182	N=63	N=36
Last time tested for HIV was	<b>:</b> :															
Voluntary	21.5	16.5	30.1	26.3	18.9	16.6	32.5	31.0	22.3	15.0	52.5	50.0	33.8	25.8	34.9	44.4
Obligtatory	16.8	22.6	14.8	12.5	17.5	23.3	13.4	6.4	23.0	20.7	16.8	7.0	20.9	34.6	27.0	14.0
Not tested in last 12 months	61.6	61.0	55.2	61.2	63.6	60.1	54.1	62.6	54.8	64.3	30.7	43.0	45.3	39.6	38.1	41.7
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Last time tested for HIV, rec	eived ex	xplanati	on abou	ıt ways	of trans	mission	and oth	ner infor	mation	about H	IV (cou	nseling)				
Yes		22.4		26.1		22.5		29.0		20.7		45.5		38.5	-	47.2
No		16.7		12.7		17.4		8.4		15.0		11.5		22.0		11.1
Not tested in last 12 months		61.0		61.2		60.1		62.6		64.3		43.0		39.6		41.7
Total		100.0		100.0		100.0		100.0		100.0		100.0		100.0	-	100.0
Interested in getting an HIV	test vol	untarily	if it will	be ano	nymous								_			
Yes		63.9		64.9		70.8		71.4		69.3		82.0		75.3		72.2
No		36.1		35.1		29.3		28.6		30.7		18.0		24.7		27.8
Total		100.0		100.0		100.0		100.0		100.0		100.0		100.0		100.0

	ln:	a atina D	mua Had	Pohov	oir Done	_	ble C7	iolo Cos	ializina	ot Citoo	in Kara	aanda				
		ecting D presenta			oir Kepc		uth	iais 500		CSW and				ID	Us	
		iles		ales	Ма	les		ales		les		ales	Ма	les	Fem	ales
	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003
Injection during the comme	N=897	N=510	N=752	N=490	N=440	N=253	N=471	N=297	N=283	N=140	N=280	N=200	N=225	N=182	N=63	N=36
Injecting drug use commo			`	•			7.0	40.7	110	40.4	44.4	40.0	100	04.0	20.0	C4 4
Very common	10.6	45.1	8.8	39.4	9.1	49.0	7.2	40.7	11.0 36.4	42.1 33.6	11.4	46.0 34.5	16.9 56.0	64.8	22.2	61.1
Somewhat common	37.7	32.6	32.0	34.7	40.5	33.6	34.0	35.4			40.0			29.1	44.4	30.6
Not very common	26.8	12.2	29.7	12.7	28.4	9.5	32.9	13.8	31.4	10.7	28.9	10.5	22.7	5.0	23.8	5.6
Does not occur in this area	3.5	2.6	4.8	2.2	5.0	2.4	4.5	1.4	2.8	2.9	3.6	1.0	0.0	0.6	1.6	2.8
Don't know	21.5	7.7	24.7	11.0	17.0	5.5	21.4	8.8	18.4	10.7	16.1	8.0	4.4	0.6	7.9	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Injecting drug users social							1									
Yes	58.2	73.1	56.0	67.6	63.0	81.0	62.0	73.1	64.7	69.3	75.0	80.0	87.6	96.7	87.3	100.0
No	8.5	9.2	6.6	8.4	9.5	7.5	5.7	5.7	8.5	10.0	4.6	5.5	1.8	0.6	1.6	0.0
Don't know	33.3	17.7	37.4	24.1	27.5	11.5	32.3	21.2	26.9	20.7	20.4	14.5	10.7	2.8	11.1	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Heard of place in city wher	e IDUs	can get	new syr	inges												
Yes	36.1	36.1	31.5	28.8	40.7	42.3	34.0	33.3	37.5	30.7	54.3	42.0	73.3	70.9	69.8	61.1
No	63.9	63.9	68.5	71.2	59.3	57.7	66.0	66.7	62.5	69.3	45.7	58.0	26.7	29.1	30.2	38.9
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Ever injected drugs																
Yes	27.0	41.6	12.6	12.0	28.0	51.0	13.2	14.1	32.5	35.7	29.6	17.5	100.0	98.4	100.0	91.7
Never	71.3	55.9	84.2	84.3	70.2	46.3	82.8	80.8	65.0	60.0	63.9	76.0	0.0	0.0	0.0	0.0
Refused to answer	1.7	2.6	3.2	3.7	1.8	2.8	4.0	5.1	2.5	4.3	6.4	6.5	0.0	1.7	0.0	8.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
When last injected drugs	•		•		•				•		•		•			
Past 7 days	14.7	29.0	4.1	5.5	15.5	36.8	4.2	6.7	15.2	13.6	7.1	6.0	71.6	81.3	61.9	75.0
Past 2-4 weeks	3.0	3.5	1.3	0.8	4.1	4.4	1.5	1.4	3.5	2.9	4.3	1.5	15.6	9.9	25.4	11.1
Past 2-3 months	1.8	1.8	0.7	0.6	0.9	1.6	0.6	1.0	1.8	3.6	2.1	0.5	8.4	5.0	9.5	8.3
Past 4-6 months	1.1	1.4	0.3	0.4	0.9	0.8	0.2	0.7	1.1	0.7	0.7	0.5	4.4	3.9	3.2	5.6
Past 7-12 months	1.4	1.8	0.8	3.3	2.3	2.4	0.8	4.0	2.8	5.7	2.5	6.5	0.0	0.0	0.0	0.0
Over one year ago	5.0	6.7	5.5	5.1	4.5	7.9	5.7	5.4	8.1	13.6	12.9	9.0	0.0	0.0	0.0	0.0
Never injected drugs	71.3	55.9	84.2	84.3	70.2	46.3	82.8	80.8	65.0	60.0	63.9	76.0	0.0	0.0	0.0	0.0
Missing	1.6	0.0	3.2	0.0	1.6	0.0	4.0	0.0	2.5	0.0	6.4	0.0	0.0	0.0	0.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	.00.0	.00.0

						Tal	ble C7									
	lnj	ecting D	rug Use	Behave	oir Repo	orted by	Individu	uals Soc	ializing	at Sites	in Kara	ganda				
	Rep	resenta	tive San	nple		Yo	uth		(	CSW and	d Clients	s		ID	Us	
	Ма	les	Fem	ales	Ма	iles	Fem	ales	Ма	les	Fem	ales	Ма	les	Fem	nales
	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003
	N=897	N=510	N=752	N=490	N=440	N=253	N=471	N=297	N=283	N=140	N=280	N=200	N=225	N=182	N=63	N=36
Ever been arrested for inje	cting dr	ugs														
Yes	14.8	20.4	4.8	6.9	11.8	20.2	4.2	9.1	12.0	19.3	10.0	12.0	56.9	48.4	36.5	38.9
No	85.2	79.6	95.2	93.1	88.2	79.8	95.8	90.9	88.0	80.7	90.0	88.0	43.1	51.7	63.5	61.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Ever met with a narcologis	st or visi	ted a na	rcologis	st dispe	nsary											
Yes	20.3	21.2	6.8	4.1	17.7	22.5	5.1	4.4	21.9	20.0	11.1	8.0	57.3	49.5	44.4	22.2
No	79.7	78.8	93.2	95.9	82.3	77.5	94.9	95.6	78.1	80.0	88.9	92.0	42.7	50.6	55.6	77.8
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Contact with Treetment Equilities 6	Table C8	olining at Cita	o in Koroso	ndo 2002	
Contact with Treatment Facilities f	Never	<4 weeks	1-6 months	7-12 months	>1 year
Representative Sample (N=897)	%	%	%	%	%
Ever been to:				1	
Private medical clinic	66.8	6.4	10.8	6.4	9.7
State medical clinic	9.0	10.7	27.6	16.9	35.7
Trust Point	91.2	4.3	2.8	0.4	1.2
TB Dispensary	80.8	1.1	3.2	2.9	11.9
Emergency	48.4	4.0	10.3	8.1	29.2
Infection Hospital	71.6	1.8	2.2	2.7	21.7
Skin/Venerological Dispensary	75.5	2.9	5.1	3.5	13.0
Private venerological doctor	95.3	1.0	1.1	1.0	1.6
Private narcological doctor	96.5	0.3	0.8	0.9	1.4
An outreach/social worker about injection drug use	93.4	4.1	1.2	0.4	0.8
Youth (N=440)	1 55	1			1 2.0
Ever been to:					
Private medical clinic	68.4	6.1	11.1	5.5	8.9
State medical clinic	7.7	10.7	33.6	15.5	32.5
Trust Point	91.8	3.4	3.0	0.7	1.1
TB Dispensary	85.0	1.4	2.3	2.3	9.1
Emergency	52.7	4.3	8.0	8.4	26.6
Infection Hospital	70.9	2.7	2.5	3.6	20.0
Skin/Venerological Dispensary	75.9	3.2	4.1	4.3	12.5
Private venerological doctor	96.4	1.4	0.7	0.9	0.7
Private venerological doctor	96.4	0.0	1.4	0.9	1.4
An outreach/social worker about injection drug use	95.7	2.0	0.9	0.5	0.9
Clients of Commercial Sex Workers (N=2		2.0	0.5	0.5	0.5
Ever been to:	203)				
Private medical clinic	51.2	8.8	18.4	10.2	11.3
State medical clinic	8.1	11.0	26.9	19.4	34.6
Trust Point	90.8	3.5	2.8	0.7	2.1
TB Dispensary	75.6	1.4	2.1	4.2	16.6
Emergency	45.9	7.4	10.6	7.8	28.3
Infection Hospital	62.9	2.5	3.9	4.9	25.8
Skin/Venerological Dispensary	58.7	6.4	6.7	7.8	20.5
Private venerological doctor	90.1	1.4	2.1	2.5	3.9
Private narcological doctor	93.6	0.4	1.4	2.1	2.5
An outreach/social worker about injection drug use	96.1	1.4	0.7	0.7	1.1
Injection Drug Users (N=225)			<u> </u>		<u> </u>
Ever been to:					
Private medical clinic	76.9	4.9	6.7	4.0	7.6
State medical clinic	8.0	12.0	28.0	18.7	33.3
Trust Point	69.3	16.0	10.2	2.7	1.8
TB Dispensary	73.8	0.9	7.6	4.0	13.8
Emergency	45.3	6.2	10.7	6.7	31.1
Infection Hospital	63.1	3.6	4.0	4.0	25.3
Skin/Venerological Dispensary	68.9	4.0	7.1	6.7	13.3
Private venerological doctor	97.3	1.3	0.4	0.4	0.4
Private narcological doctor	85.8	1.8	4.9	3.6	4.0
An outreach/social worker about injection drug use	73.8	16.4	4.4	2.7	2.7

Contact with Treatment Facilities for	Table C9	cializina at Si	tos in Karan	anda 2002	
Contact with Treatment 1 achities for	Never	<4 weeks	1-6 months	7-12 months	>1 year
Representative Sample (N=752)	%	%	%	%	%
Ever been to:	,,,	, , ,	,,,	, ,,	,,,
Private medical clinic	55.2	9.6	15.6	10.4	9.3
State medical clinic	5.3	18.2	34.8	17	24.6
Trust Point	88.7	3.7	4.1	2.3	1.2
TB Dispensary	87.1	0.9	2.5	1.9	7.6
Emergency	37.5	6	11	14.2	31.3
Infection Hospital	73.3	1.5	3.5	3.3	18.5
Skin/Venerological Dispensary	74.1	4	6.3	4.7	11
Private venerological doctor	90.8	1.6	2.9	2.4	2.3
Private narcological doctor	97.9	0.3	1.2	0	0.7
An outreach/social worker about injection drug use	94.9	3.1	1.2	0.4	0.4
Youth (N=471)	00				<b>U</b>
Ever been to:					
Private medical clinic	56.1	10.2	15.1	10.0	8.7
State medical clinic	5.3	17.0	34.4	17.6	25.7
Trust Point	86.4	4.0	5.5	3.0	1.1
TB Dispensary	89.2	0.8	2.1	1.7	6.2
Emergency	36.9	7.4	11.7	14.9	29.1
Infection Hospital	72.0	1.9	4.0	3.2	18.9
Skin/Venerological Dispensary	70.1	4.7	7.0	5.9	12.3
Private venerological doctor	88.1	2.1	3.0	3.4	3.4
Private venerological doctor	97.9	0.2	1.5	0.0	0.4
An outreach/social worker about injection drug use	94.9	3.2	1.3	0.2	0.4
Commercial Sex Workers (N=280)	94.9	5.2	1.5	0.2	0.4
Ever been to:					
Private medical clinic	56.8	9.6	12.1	10.4	11.1
State medical clinic	5.0	9.6	36.8	21.1	27.5
Trust Point	71.1	7.5	12.9	6.4	2.1
TB Dispensary	85.0	1.4	2.9	2.5	8.2
Emergency	29.3	8.2	11.1	17.5	33.9
Infection Hospital	58.2	1.8	3.9	5.4	30.7
Skin/Venerological Dispensary	46.1	8.6	11.8	10	23.6
Private venerological doctor	75.7	5.4	6.8	6.4	5.7
Private narcological doctor	97.5	0.7	1.1	0.0	0.7
An outreach/social worker about injection drug use	87.5	6.4	3.9	1.1	1.1
Injection Drug Users (N=63)	07.0	0.1	0.0		
Ever been to:					
Private medical clinic	74.6	4.8	7.9	6.3	6.3
State medical clinic	3.2	12.7	39.7	14.3	30.2
Trust Point	68.3	17.5	3.2	7.9	3.2
TB Dispensary	69.8	0.0	12.7	9.5	7.9
Emergency	30.2	9.5	12.7	17.5	30.2
Infection Hospital	50.2	9.5	6.3	6.3	27.0
Skin/Venerological Dispensary	54.0	4.8	19.0	4.8	17.5
Private venerological doctor	82.5	1.6	7.9	6.3	1.6
Private venerological doctor	81.0	3.2	7.9 12.7	1.6	1.6
An outreach/social worker about injection drug use	60.3	27.0	11.1	1.6	0.0

			le C10					
STI Symptoms								
		ative Sample		outh		nd Clients		OUs
	Males	Females	Males	Females	Males	Females	Males	Females
	N=510	N=490	N=253	N=297	N=140	N=200	N=182	N=36
Heard of diseases or infections that can be train				-				
Yes	96.2	98.2	94.9	98.3	96.4	99.0	92.9	94.4
No	3.7	1.8	5.1	1.7	3.6	1.0	7.1	5.6
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Signs or symptoms that someone has a sexual		ed disease or i	nfection					
Lower abdominal pain	9.8	39.4	8.7	39.7	14.3	50.0	7.7	41.7
Discharge from vagina (woman) / penis (man)	67.7	72.5	70.0	71.7	69.3	76.0	62.1	69.4
Itching in genital area	35.9	50.0	33.2	52.5	40.0	54.5	27.5	38.9
Burning pain on urination	37.5	22.2	39.1	23.2	32.9	26.5	35.2	19.4
Pain during intercourse	23.9	26.5	22.9	30.3	28.6	34.0	18.7	25.0
Genital ulcers / open sores	42.6	57.1	43.5	59.3	51.4	63.5	36.8	58.3
Inflammation in genital area	22.2	27.4	20.2	28.6	23.6	31.5	15.9	13.9
Blood in urine	7.8	5.3	9.1	7.7	7.9	8.0	9.9	0.0
Failure to pass urine	11.6	4.1	11.1	4.0	17.9	5.0	7.7	2.8
Loss of weight	6.9	9.8	7.1	7.4	5.7	10.5	10.4	11.1
Inability to conceive (woman) / impotence (man)	8.0	5.1	5.9	5.4	10.0	5.0	7.1	5.6
Other	4.5	7.1	4.0	5.4	2.9	7.0	6.6	11.1
No symptoms	0.0	0.2	0.0	0.0	0.0	0.0	0.0	0.0
Don't know	4.7	5.7	3.6	4.0	2.9	2.0	5.5	5.6
Refused	1.4	0.6	1.2	1.0	1.4	1.0	1.1	0.0
In the past 4 weeks, the respondent has had th	e following s	symptoms						
Any Symptoms	8.2	27.1	9.5	32.0	14.3	42.5	12.1	33.3
Lower abdominal pain (women)		19.6		22.2		30.5		22.2
Pain on urination (men)	6.7		8.3		11.4		9.3	
Unusual discharge ´	4.7	19.8	5.5	24.6	8.6	33.5	7.7	19.4
Sores	1.2	3.7	1.2	4.7	2.1	7.5	1.7	8.3
Received treatment for symptoms in past 4 we	eks	'						
Self-Treatment	4.3	14.1	5.5	17.2	7.9	26.5	6.0	22.2
Private Physician or Clinic	0.4	3.7	0.0	4.0	1.4	5.5	0.0	2.8
Public Clinic or Hospital	3.9	13.5	4.0	15.8	7.1	19.0	5.0	13.9
Did not receive treatment	1.0	2.8	0.8	4.0	2.1	4.0	2.2	2.8
No symptoms in past 4 weeks	91.8	72.9	90.5	68.0	85.7	57.5	87.9	66.7

			Comm	araial Ca	vy by lo	_	ble C11	awad at	Citoo in	Vorono	ndo					
	Pon	resenta			ex by in		<u>s intervi</u> uth	ewed at		CSW an		•		ID	le	
		les		ales	Ma	les		ales		iles		ales	Ma	יטו les		ales
	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003
	N=897			N=490				N=297	N=283				N=225		N=63	N=36
Has received (women) or									200		200		1			
Yes	28.1	27.5	31.8	40.8	28.0	21.0	38.2	55.2	100.0	100.0	100.0	100.0	27.1	15.9	63.5	47.2
No	69.2	72.4	68.2	59.2	69.3	79.1	61.8	44.8	0.0	0.0	0.0	0.0	64.9	83.5	36.5	52.8
Don't remember	2.7	0.2	0.0	0.0	2.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	8.0	0.6	0.0	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of places women	who en	gage in	transac	tional se	ex go to	look for	clients	in past	4 weeks	<b>;</b>						
1	0.0	0.0	14.8	10.2	0.0	0.0	18.7	12.5	0.0	0.0	45.0	25.0	0.0	0.0	23.8	13.9
2	0.0	0.0	6.3	19.2	0.0	0.0	6.4	26.9	0.0	0.0	20.7	47.0	0.0	0.0	12.7	25.0
3	0.0	0.0	6.9	8.4	0.0	0.0	8.7	11.8	0.0	0.0	19.6	20.5	0.0	0.0	15.9	8.3
4+	0.0	0.0	3.9	3.1	0.0	0.0	4.5	4.0	0.0	0.0	14.6	7.5	0.0	0.0	11.1	0.0
Not applicable	100.0	100.0	68.2	59.2	100.0	100.0	61.8	44.8	100.0	100.0	0.0	0.0	100.0	100.0	36.5	52.8
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Last time received money	in exch	nange fo	r sex, u	sed a co	ndom											
Yes		0.0		35.5		0.0		48.2		0.0		87.0		0.0		44.4
No		0.0		5.3		0.0		7.1		0.0		13.0		0.0		2.8
Not applicable		100.0		59.2		100.0		44.8		100.0		0.0		100.0		52.8
Total		100.0		100.0		100.0		100.0		100.0		100.0		100.0		100.0
Who suggested using cor	ndom la	st time r	eceived	money	in exch	ange for	sex									
Myself		0.0		14.7		0.0		19.2		0.0		36.0		0.0		13.9
Partner		0.0		6.9		0.0		9.4		0.0		17.0		0.0		13.9
Partner and I		0.0		12.9		0.0		18.2		0.0		31.5		0.0		11.1
Do not remember		0.0		1.0		0.0		1.4		0.0		2.5		0.0		5.6
Did not used condom last time		0.0		5.3		0.0		7.1		0.0		13.0		0.0		2.8
Not applicable		100.0		59.2		100.0		44.8		100.0		0.0		100.0		52.8
Total		100.0		100.0		100.0		100.0		100.0		100.0		100.0		100.0

						Ta	ble C11									
	Commercial Sex by Individuals Interviewed at Sites in Karaganda															
	Rep	resenta	tive San	nple		Yo	uth			CSW and	d Client	S		IDI	Us	
	Ма	les	Fem	ales	Ма	les	Fem	nales	Ма	les	Fem	ales	Ма	les	Fem	ales
	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003	2002	2003
	N=897	N=510	N=752	N=490	N=440	N=253	N=471	N=297	N=283	N=140	N=280	N=200	N=225	N=182	N=63	N=36
Why did not use a condo	m last ti	me rece	ived mo	ney in e	xchange	e for sex	(									
Partner protested		0.0		2.2		0.0		3.4		0.0		5.5		0.0		0.0
Do not like condoms		0.0		0.4		0.0		0.3		0.0		1.0		0.0		0.0
Another contraceptive		0.0		0.4		0.0		0.7		0.0		1.0		0.0		0.0
Condoms too expensive		0.0		0.4		0.0		0.0		0.0		1.0		0.0		0.0
Did not have condoms at hand		0.0		2.5		0.0		3.0		0.0		6.0		0.0		2.8
Condoms low quality		0.0		0.2		0.0		0.0		0.0		0.5		0.0		0.0
Used condom last time		0.0		35.5		0.0		48.2		0.0		87.0		0.0		44.4
Not applicable		100.0		59.2		100.0		44.8		100.0		0.0		100.0		52.8

Needle Sharing Beha	Table C12	Drug Users in Kar	raganda	
	•	les		ales
	2002	2003	2002	2003
	N=225	N=182	N=63	N=36
Shared syringe at last injection				
Yes	19.1	19.2	12.7	19.4
No	68.4	75.8	65.1	72.2
Don't know/remember	12.4	5.0	22.2	8.3
Total	100.0	100.0	100.0	100.0
In last 4 weeks, shared syringe with other IDU				
Yes	31.6	31.9	39.7	38.9
No	64.9	67.0	60.3	61.1
Don't know/remember	3.6	1.1	0.0	0.0
Total	100.0	100.0	100.0	100.0
In last 4 weeks, got new syringe				
Yes	36.9	37.4	38.1	30.6
No	62.2	61.5	60.3	69.4
Don't know/remember	0.9	1.1	1.6	0.0
Total	100.0	100.0	100.0	100.0
Number of times injected drugs yesterday	1 00.4			
0	39.1	20.9	38.1	27.8
1	39.6	48.4	27.0	47.2
2	16.4	23.6	23.8	16.7
3	3.6	6.6	6.3	8.3
4+	1.3	0.6	4.8	0.0
Total	100.0	100.0	100.0	100.0
Number of different syringes used yesterday	20.4	00.0	00.4	07.0
0	39.1	20.9	38.1	27.8
1	51.6	63.2	44.4	58.3
2	8.0	12.6	12.7	11.1
3 4+	1.3	3.3 0.0	4.8 0.0	2.8 0.0
Total	0.0 100.0	100.0	100.0	100.0
			100.0	100.0
Number of different people with whom shared	56.4	62.6	57.1	52.8
	6.7	3.9	4.8	8.3
1 2	16.4	3.9 8.8	4.8 9.5	5.6
3	9.3	0.0 11.5	9.5 15.9	13.9
4 9	10.7	9.9	6.3	10.3
10+	0.4	3.3	6.3	8.3
Total	100.0	100.0	100.0	100.0
Number of different people with whom shared				100.0
0	87.1	83.5	79.4	72.2
1	7.1	8.2	3.2	5.6
2	4.0	3.9	12.7	16.7
3	1.8	1.1	0.0	2.8
4 9	0.0	3.3	3.2	2.8
10+	0.0	0.0	1.6	0.0
Total	100.0	100.0	100.0	100.0
i Otal	100.0	100.0	100.0	100.0

	Table C12								
Needle Sharing Behavoir of Injection Drug Users in Karaganda									
	Ma	les	Fem	nales					
	2002	2003	2002	2003					
	N=225	N=182	N=63	N=36					
Where got last syringe used			_						
Pharmacy	52.9	60.4	41.3	63.9					
Purchased somewhere else	9.3	7.1	7.9	5.6					
Trust point	20.0	17.0	23.8	19.4					
Friend	11.1	11.5	11.1	5.6					
Other	4.0	1.7	4.8	2.8					
Don't know/remember	2.7	2.2	11.1	2.8					
Total	100.0	100.0	100.0	100.0					
Can get new syringes whenever wants									
Always	68.9	68.1	65.1	72.2					
Sometimes	29.8	30.8	28.6	27.8					
Never	1.3	1.1	6.3	0.0					
Total	100.0	100.0	100.0	100.0					
Why can't always get new syringes when wan	ts								
No money	16.4	22.0	17.5	13.9					
Exchange station too far away	8.4	11.5	4.8	5.6					
Kiosk or drug store too far away	1.8	2.8	6.3	2.8					
Police menace	10.2	3.9	14.3	5.6					
Don't think it is necessary to get a new syringe	2.7	6.0	7.9	8.3					
Other	1.3	2.8	0.0	2.8					
Always can get new syringes	68.9	68.1	65.1	72.2					

Drug Use History of Injec	Table C13	Socializing in K	araganda	
Drug doe motory or mijec		les	<del></del>	ales
	2002	2003	2002	2003
	N=225	N=182	N=63	N=36
Main way to take drugs			11 11	
Individually	24.0	25.3	15.9	25.0
Always with same group	38.2	37.4	46.0	38.9
With different groups	3.1	3.9	9.5	5.6
Depends on circumstances	34.7	33.5	28.6	30.6
Total	100.0	100.0	100.0	100.0
Most freqently injected drugs			1	
Raw opium (hanka)	35.6	58.8	31.7	41.7
Heroin	62.2	56.0	60.3	72.2
Other	2.2	2.2	7.9	0.0
In last 4 weeks, took drugs from common reserv			1	
Yes	67.1	55.5	71.4	63.9
No	31.6	44.0	23.8	36.1
Don't know/remember	1.3	0.6	4.8	0.0
Total	100.0	100.0	100.0	100.0
In last 4 weeks, used ready made drug solution	without boiling		1	
Yes	24.0	24.2	27.0	55.6
No	73.8	74.2	60.3	41.7
Don't know/remember	2.2	1.7	12.7	2.8
Total	100.0	100.0	100.0	100.0
Length of time injecting drugs				
< 1 year	7.1	10.4	12.7	11.1
1 year	19.6	13.2	12.7	8.3
2 years	19.6	15.4	23.8	16.7
3-4 years	23.1	26.4	25.4	36.1
5-9 years	22.2	23.6	19.0	22.2
10+ years	8.4	11.0	6.3	5.6
Total	100.0	100.0	100.0	100.0
Ever been arrested for injecting drugs				
Yes	56.9	48.4	36.5	38.9
No	43.1	51.7	63.5	61.1
Total	100.0	0.0	100.0	100.0
Think they have been registered by police				
Yes	44.4	40.1	30.2	36.1
No	12.4	8.2	6.3	2.8
Never arrested for injecting drugs	43.1	51.7	63.5	61.1
Total	100.0	100.0	100.0	100.0
Think they have been registered by police as ID	Us			
Yes	36.0	37.9	23.8	33.3
No	8.4	2.2	6.3	2.8
Never been registered by police	12.4	8.2	6.3	2.8
Never arrested for injecting drugs	43.1	51.7	63.5	61.1
Total	100.0	100.0	100.0	100.0
Ever met with a narcologist or visited a narcolog	gist dispensary			
Yes	57.3	49.5	44.4	22.2
No	42.7	50.6	55.6	77.8
Total	100.0	100.0	100.0	100.0

	Table C13			
Drug Use History of Inject				-1
		iles		ales
	2002 N=225	2003 N=182	2002 N=63	2003 N=36
Think they have been registered with narcologis	t or narcology d	ispensary		
Yes	42.2	39.6	27.0	19.4
No	15.1	9.9	17.5	2.8
Never met narcologist/dispensary	42.7	50.6	55.6	77.8
Total	100.0	100.0	100.0	100.0
Think they have been registered with narcologis	t or narcology d	ispensary as IDI	Js	
Yes	35.1	35.2	20.6	19.4
No	7.1	4.4	6.3	0.0
Never been registered with narcologist/dispensary	15.1	9.9	17.5	2.8
Never met narcologist/dispensary	42.7	50.6	55.6	77.8
Total	100.0	100.0	100.0	100.0

## Appendix 2 – Baseline Questionnaires

**KEY INFORMANT CHARACTERISTICS - CAR** (5/16/02)

No.	Questions	Coding categories
K1	Assessment City	Almaty 1 Karaganda 2 Tashkent 3 Osh 4
K2	Location of Interview	UNIT in city:
K3	Interviewer Number / Key Informant Number	
K4	Date	
K5	Gender of Key Informant	MALE 1 FEMALE 2
K6	Type of Key Informant:	ENTER CODE:
	TAXI DRIVER 01	DADMENIAMAITEDO 16
	PUBLIC TRANSPORTATION DRIVER 02	BARMEN/WAITERS 16 HOTEL STAFF 17
	LONG DISTANCE TRUCK DRIVERS 03	SAUNA STAFF 18
	SEX WORKER 04	SAUNA STAIT TO
	CLIENT OF SEX WORKER 05	HOMELESS 19
	PIMP 06	UNEMPLOYED 20
	INJECTION DRUG USER 07	NEW ARRIVALS/ TEMPORARY 21
	NON-GOVERNMENTAL ORG (NGO) STAFF 08	STREET CLEANERS 22
	WORKERS OF AIDS CENTER, NARCOLOGICA	STAIRWELL CLEANER 23
	DISPENSARY, VENEROLOGICAL CLINIC 09	FLAT OWNERS COOP PERSONNEL 24
	MEDICAL PERSONNEL 10	YOUTH 25
	POLICE OFFICER 11	DORMITORY RESIDENT 26
	HEALTH CARE/ PHARMACY WORKER 12	RESIDENT OF AREA 27
	MINI-MARKET /SHOP SELLER 13	OTHER
	SELLERS AND WORKERS IN MARKET 14	OTHER 50
	STREET VENDOR 15	

No.	Questions	Coding categories
health new se be a b reduce the na drug in are just see if betwe You w complemay b	I am working for in Karagar programs are needed in the city. The purpose of the sexual partners and to find out where people who inject big problem yet in this area, but it could become a big peethe chances they will get infected. I would like to ask ames and locations of places where people meet new semigectors for prevention programs. We don't want to know strinterested in public places. If you tell us where these they want to have a health program there. Telling us the seminant of the seminant seminant program to the contacted in the future. Your answers cannot detely voluntary and you may refuse to answer any que se embarrassed by the questions. You may not personation this a new health program will be carried out in this contact.	drugs can be found. AIDS doesn't seem to problem if people don't learn about how to a you a few questions. We want you to tell us sexual partners and where we can reach ow the names of any private residences. We a places are then we will visit those places to the names and locations of sites should take you to provide any identifying information. It be linked back to you. Your participation is estion or completely refuse to participate. You ally benefit directly from this study, but in a
	ame and phone number of the person in charge of this uestions you can contact at the	
K7	Are you willing to participate? *IF NO, STOP INTERVIEW.	YES 1 IF NO, STOP INTERVIEW. NO 2
K8	How old are you?  *STOP INTERVIEW IF RESPONDENT IS YOUNGER THAN 18	
K9	We want to know where people socialize with the intervill help us plan AIDS prevention programs there and want to know:  Where youth socialize and meet new sexual part.  Where women or men sell sex.  Where other people such as single men, gay ment to find new sexual partners.  Where people in this unit go to meet new partner want to know where people from outside the unit unit.  WRITE EACH PLACE NAMED ON THE LIST ON THE NEGUESTIONNAIRE, FILL OUT A PLACE REPORT FORM F	thave condoms available. We especially eners  n, temporary residents, migrant workers, go as in this unit and in other units. We also come to meet new sexual partners in this  EXT PAGE. AFTER FINISHING THIS
K10	We also want to know what you think about drug use around here. Does injecting drug use occur here (in this unit)?	YES 1 NO 2
K11	Have you seen any syringes around here in the last 4 weeks?	YES 1 NO 2
K12	Where can syringes be found around here? *WRITE EACH PLACE NAMED ON THE LIST ON THE QUESTIONNAIRE, FILL OUT A PLACE REPORT FOR	

No.	Questions	Coding categories
K13	Where can injecting drug users be found around here *WRITE EACH PLACE NAMED ON THE LIST ON THIS QUESTIONNAIRE, FILL OUT A PLACE RE	N THE NEXT PAGE. AFTER FINISHING
K14	Do sex workers look for customers around here?	YES 1 NO 2
K15	Where can sex workers be found?  *WRITE EACH PLACE NAMED ON THE LIST ON THE QUESTIONNAIRE, FILL OUT A PLACE REPORT FOR	
K16	Number of places named by Key Informant within this unit.	
	Number of places named by Key Informant outside this unit.	

LIST PLACES NAMED ON LINES BELOW. USING THIS LIST, ASK THE RESPONDENT:

Of all the places you named, which is the place where the most people meet new sexual partners in one day or evening? CIRCLE "1" IN COLUMN TITLED "Sex' NEXT TO THIS PLACE.

Of all the places you named, which is the place where the most drug injectors or drug injecting equipment can be found? CIRCLE "2" IN COLUMN TITLED "Drug" NEXT TO THIS PLACE.

Of all the places you named, which is the place where the most sex workers can be found? CIRCLE "3" IN COLUMN TITLED "SexWorker" NEXT TO THIS PLACE.

AFTER RECORDING WHICH THREE PLACES ARE PRIORITIES, FILL OUT A PLACE REPORT FORM WITH THE RESPONDENT FOR EACH PLACE ON THE LIST (NOT ONLY PRIORITIES).

DDIODITY DI ACE

Sex   Drug   SexWorker   1   2   3   Sex   Dru		PRIORITY PLACE
Sex   Drug   SexWorker   1   2   3   Sex   Dru		Sex Drug SexWorker
2.       1       2       3         3.       1       2       3         4.       1       2       3         5.       1       2       3         5.       1       2       3         5.       1       2       3         Sex       Drug       SexWorker         6.       1       2       3         Sex       Drug       SexWorker         7.       1       2       3         Sex       Drug       SexWorker         8.       1       2       3         Sex       Drug       SexWorker         9.       1       2       3         Sex       Drug       SexWorker         1       2       3         Sex       Drug       SexWorker         1       2       3         Sex       Drug       SexWorker	1	1 2 3
Sex   Drug   SexWorker   1   2   3   Sex   Dru		Sex Drug SexWorker
3.       1       2       3         4.       1       2       3         5.       1       2       3         5.       1       2       3         6.       1       2       3         7.       1       2       3         8.       1       2       3         Sex       Drug       SexWorker         9.       1       2       3         Sex       Drug       SexWorker         1       2       3         Sex       Drug       SexWorker         1       2       3         Sex       Drug       SexWorker         9.       1       2       3         Sex       Drug       SexWorker	2	<del> </del>
Sex   Drug   SexWorker		Sex Drug SexWorker
4.       1       2       3         5.       1       2       3         5.       1       2       3         5.       1       2       3         5ex       Drug       SexWorker         7.       1       2       3         8.       1       2       3         Sex       Drug       SexWorker         9.       1       2       3         Sex       Drug       SexWorker         9.       1       2       3         Sex       Drug       SexWorker	3	<del> </del>
Sex   Drug   SexWorker   1   2   3   Sex   Dru		Sex Drug SexWorker
5.       1       2       3         Sex       Drug       SexWorker         6.       1       2       3         Sex       Drug       SexWorker         7.       1       2       3         Sex       Drug       SexWorker         9.       1       2       3         Sex       Drug       SexWorker         9.       1       2       3         Sex       Drug       SexWorker	4	1 2 3
Sex Drug SexWorker		Sex Drug SexWorker
6.       1       2       3         7.       1       2       3         8.       1       2       3         Sex       Drug       SexWorker         1       2       3         Sex       Drug       SexWorker         9.       1       2       3         Sex       Drug       SexWorker         9.       1       2       3         Sex       Drug       SexWorker	5	<del></del>
Sex   Drug SexWorker   1   2   3     Sex   Drug SexWorker     1   2   3   Sex   Drug SexWorker   1   2   3   Sex   Drug SexWorker     1   2   3   Sex   Drug SexWorker     1   2   3   Sex   Drug SexWorker     1   2   3   Sex   Drug SexWorker     1   2   3   Sex   Drug SexWorker		Sex Drug SexWorker
7	6	<del> </del>
Sex Drug SexWorker  1 2 3 Sex Drug SexWorker  1 2 3 Sex Drug SexWorker  1 2 3 Sex Drug SexWorker		•
8.       1 2 3         Sex Drug SexWorker         9.       1 2 3         Sex Drug SexWorker	7	<del></del>
9 Sex Drug SexWorker 1 2 3 Sex Drug SexWorker		•
9 1 2 3 Sex Drug SexWorker	8	<del> </del>
Sex Drug SexWorker		
· · · · · · · · · · · · · · · · · · ·	9	<del></del>
10 1 2 3		· · · · · · · · · · · · · · · · · · ·
	10	1 2 3

## PLACE REPORT FORM - CAR 5/16/02

		Almaty 1
S1	Assessment City	Karaganda 2
		Tashkent 3
		Osh 4
S2	Location of Interview	UNIT
S3	Interviewer Number / Key Informant Number	/
S4	Key Informant / Place Report Number	
S5	Name of place	
S6	Place named as a priority place for	PRIORITY  Meeting new sexual partners 1  Injecting drug users 2  Sex workers 3
		Not a priority for any group 9
S7	Address of place and how to find it.	
S8	Where is the place located? In what unit?	UNIT in city (CODE 1-32):
S9	TYPE OF PLACE:	*ENTER CODE:
	01 BAR/CAFÉ/RESTAURANT 02 NIGHTCLUB/DISCO 03 CASINO 04 GAY CLUB 05 HOTEL 06 SAUNA 07 BILLIARDS 08 GAME CLUB 09 COMPUTER CLUB 10 DORMITORY 11 PRIVATE APARTMENT/FLAT 12 BASEMENT/ROOF 13 STAIRWELLS 14 UNUSED/ ABANDONED BUIL	26 PARK 27 OTHER (specify):

		YES	NO
S10	Is this a place where	People meet sexual partners 1	2
	to this a place where	Drug Injectors can be found 1	2
		Syringes are lying around 1	2
		Sex workers solicit 1	2

## SITE VERIFICATION FORM (May 21, 2002)

Unique Place Number: \_\_\_\_ \_\_\_

No.	Questions	Coding Categories
V1	Assessment Area	Almaty 1 Karaganda 2 Tashkent 3 Osh 4
V2	Location of Site	UNIT CODE:
V3	List ID Number	
V4	Name of Place	
V5	Correct Street Address	
V6	What is the closest public transportation route?	BUS: TROLLEY: TRAM: ROUTE TAXI/MICROBUS:
V7	Outcome of place verification	PLACE NOT FOUND 0 PLACE FOUND AND RESPONDENT INTERVIEWED 1 PLACE FOUND BUT NOT WILLING RESPONDENT 2 PLACE CLOSED TEMPORARILY 3 NO LONGER A PLACE 4

No.	Questions	Coding Categories
	TYPE OF SITE:	
V8		*ENTER CODE:
	01 BAR/CAFÉ/RESTAURANT 02 NIGHTCLUB/DISCO 03 CASINO 04 GAY CLUB 05 HOTEL 06 SAUNA 07 BILLIARDS 08 GAME CLUB 09 COMPUTER CLUB 10 DORMITORY 11 PRIVATE APARTMENT/FLAT 12 BASEMENT/ROOF 13 STAIRWELLS 14 UNUSED/ ABANDONED BUI 15 SCHOOL 16 COLLEGE/PROFESSIONAL 17 UNIVERSITY CAMPUS/TUTO	LDING SCHOOL
V9	Interviewer Number	
V10	Date (DD/MM)	/
V11	Day of the week	MONDAY 1 TUESDAY 2 WEDNESDAY 3 THURSDAY 4 FRIDAY 5 SATURDAY 6 SUNDAY 7
V12	Time of day (24 HOUR CLOC	():
V13	Number socializing upon interviewer arrival at place	MEN:
V14	Number of used syringes observed by interviewer at the	site
V15	Gender of respondent	MALE 1 FEMALE 2
	l	

No.	Questions	Coding Categories			
Hello. I am working on a study to identify where better health programs are needed in the city. I would like to ask you some questions about this place and the people who come here. The interview should take between 15 and 30 minutes of your time. I won't ask your name or any other identifying information. Your participation is completely voluntary and you may refuse to answer any question or completely refuse to participate. There are no risks to participating but it is possible you may be embarrassed by the questions. You may not benefit directly from this research but the information may help in planning better health program.  This is what we will do with the information you give us. We are asking people these questions at hundreds of places in the city. Your answers will be combined with information about other places like this and will not be reported about this place alone. Your name will not be recorded anywhere and we won't ask any information about you except to make sure you are over 17.  The name and phone number of the person in charge of this study are on this piece of paper. If you have any questions you can contact at					
V16	Do you agree to participate?	YES 1 NO 2			
V17	How old are you?  *CONCLUDE INTERVIEW IF RESPONDENT IS YOUNGER THAN 18.				
V18	How many years has this place been in operation as a place w people can pass time?				
V19	Which types of activities take phere?  READ LIST  CIRCLE ONE CODE FOR EACACTIVITY	Beer Consumed 1 2 8 Hard Alcohol Consumed 1 2 8 TV Or Video Viewing 1 2 8			

No.	Questions						Coding	g Categ	ories
							YI	ES NO	DK
V20	I have been told that people socialize at places like this and	d	Do me	en meet ne	w female s	exual partı			
	meet sexual partners here.		Do	women me	et new sex	kual partne	ers here?	1 2	2 8
	READ LIST		Г	o men me	et male (ga	ıv) sexual ı	nartners?	1 2	2 8
			Does	s someone	onsite faci	litates part	nersnips :	<sup>2</sup> 1 2	2 8
V21	Do female sex workers solicit							ΥE	ES 1
	customers here?							N	0 2
							DON'	T KNO	N 8
							DON		
V22	IF YES, For how many years h	nave				LES	S THAN	A YEAF	0
	female sex workers solicited customers here?						1 TO 2	YEAR	S 1
							3 TO 5	YEARS	2
							6 TO 10	YEAR:	S 3
						MODE T	HAN TEN		
						WORE I			
							DON'	T KNOV	8 V
	Let's talk in more details about	people	who c	ome here	during the I	ousiest tim	es.		
V23	Among men who come here d	urina tk	ne	None	< Half	Half	>Half	Almos	HAII/
	busiest times how many do yo			<u> </u>				7	All
	(a) Are Unemployed			0	1	2	3		4
	(b) Are Students			0	1	2	3		4
	(c) Are < Age 18			0	1	2	3		4
	(d) Live within a 10 minute wa	ılk of he	ere	0	1	2	3		4
	(e) Residents of this unit			0	1	2	3		4
	(f) Come here at least once a	week		0	1	2	3		4
	(g) Drink alcohol here			0	1	2	3		4
	(h) Find a new sexual partner are here	while t	they	0	1	2	3		4
	(i) Appear to be injection drug	g users	s	0	1	2	3		4

V24	Among woman who come here during the busiest times how many do you think are:		<u>Nor</u>	ne	< Half	· Ha	lf	>Half	Almost All/
	(a) Are Unemployed			0	1		2	3	4
	(b) Are Students			0	1		2	3	4
	(c) Are < Age 18			0	1		2	3	4
	(d) Live within a 10 minute walk of he	re		0	1		2	3	4
	(e) Residents of this district			0	1		2	3	4
	(f) Come here at least once a week			0	1		2	3	4
	(g) Drink alcohol here			0	1		2	3	4
		0.7		0	1		2	3	4
	(h) Find a new sexual partner while th	еу		Ü	•		_	Ü	7
	are here			0	1		2	3	4
	(i) Appear to be injection drug users			U	'		2	3	4
V25	During a typical week in the last two			6-1	11am	11am 5pm		5-10pm	10pm- 6am
V23	months, what were the busiest	MOI	N		1	2 2		3	4
	time(s) here?	TUE			1	2		3	4
		WEI			1	2		3	4
	PROBE FOR DAYS AND TIMES OF	THU	JRS		1	2		3	4
	ALLOWED FOR EACH DAY.		_		1	2		3	4
					1	2		3	4
		SUN	N		ı			3	4
V26	What is the maximum number of men who come to this place in one day? Try to estimate the total number of men who come at any time between opening and closing.  READ OPTIONS IF NECESSARY								< 10 1 11-20 2 21-50 3 51-100 4 101-300 5 301-500 6 501-1000 7
V27	What is the maximum number of women who come to this place in one day? Try to estimate the total number of women who come at any time between opening and closing.  READ OPTIONS IF NECESSARY								< 10 1 11-20 2 21-50 3 51-100 4 101-300 5 301-500 6 501-1000 7

V28	What are the busiest times of the year?  CAN MARK YES FOR MORE THAN ONE OPTION	YES NO WINTER 1 2 SPRING 1 2 SUMMER 1 2 AUTUMN 1 2 HOLIDAYS 1 2
		OTHER 1 2 Specify
V29	Have there ever been any AIDS prevention activities at this place?	YES 1 NO 2
	IF YES: What types of activities?	ACTIVITIES
V30	In the last 12 months, how often have condoms been available here?	ALWAYS 1 SOMETIMES 2 NEVER 3
V31	Are there any condoms here today?  If YES, can I see one?	YES, BUT YOU CANT SEE ONE 1 YES, AND A CONDOM WAS SEEN 2
	If YES, how many different brands of condoms?	NO 3  NUMBER OF BRANDS:
V32	Is it possible for someone to find a condom within 10 minutes of leaving this place at night?	YES 1 NO 2 DON'T KNOW 8
V33	Would you be willing to have AIDS educational programs here?	YES 1 NO 2 NOT APPLICABLE 9
V34	Would you be willing to sell condoms here?	YES 1 NO 2 NOT APPLICABLE 9
V35	We also want to know what you think about drug use in this unit. How common is injection drug use in this unit?	VERY COMMON 1  SOMEWHAT COMMON 2  NOT VERY COMMON 3  DOES NOT OCCUR IN THIS AREA 4

V36	Have you seen used syringes lying around inside or outside this place in the past 3 months?	YES 1 NO 2	
V37	Is this a place where drug injectors can be found?	YES 1 NO 2	
V38	IF YES, For how many years has this been a place where drug injectors can be found?	LESS THAN A YEAR 0 1 TO 2 YEARS 1 3 TO 5 YEARS 2 6 TO 10 YEARS 3 MORE THAN TEN YEARS 4 DON'T KNOW 8	
V39	Observation: Evidence of AIDS educational activities noted by interviewer at the site	NUMBER OF AIDS POSTERS DISPLAYED  NUMBER OF AIDS BROCHURES AT SITE  NUMBER OF CONDOMS VISIBLE	

## QUESTIONNAIRE FOR INDIVIDUALS SOCIALIZING AT SITES (5/30/02)

No.	Questions	Coding categories
Q1	Name of City	Almaty 1
		Karaganda 2 Tashkent 3
		Osh 4
Q2	Interviewer Gender and Number	MALE 1 FEMALE 2 INTERVIEWER ID NUMBER:
		INTERVIEWER IS NOWBER
Q3	Individual Interview Consecutive Number at site	
Q4	Name of site and Unique Identification Number	
		UNIQUE ID NUMBER:
Q5	Date (DD/MM/YY)	/
Q6	Time of day (24 hour clock)	::
Q7	Number socializing at place before interview	MEN:
		WOMEN:
Q8	According to the opinion of interviewer, amount of drug injectors and sex workers socializing at place before interview.	MEN BOTH SEX WORKER AND IDU:
	GIVE YOUR BEST ESTIMATE.	SEX WORKER ONLY:
GIVE TOOK BES	GIVE TOOK BEST ESTIMATE.	IDU ONLY:
		WOMEN
		BOTH SEX WORKER AND IDU:
		SEX WORKER ONLY:
		IDU ONLY:

No.	Questions		Coding categories	
Q9	Gender of respondent		MALE 1	
	Condor or respondent		FEMALE 2	
Q10	Interviewer opinion if respondent is I	DU and/or	IDU ONLY 1	
			CSW ONLY 2	
			BOTH IDU AND CSW 3	
Hello. I am working on a study to identify where better health programs are needed in the city. I would I to ask you some questions about your behavior, including sexual behavior and other risky behaviors. T interview should take between 20 and 30 minutes of your time and you will not be contacted in the future I won't ask your name or any other identifying information. Your answers will be kept confidential. Your participation is completely voluntary and you may refuse to answer any question or completely refuse to participate. There are no risks to participating but it is possible you may be embarrassed by the questions. You may not benefit directly from this research but the information may help in planning bett health programs.  This is what we will do with the information you give us. Your answers will be recorded on a paper that only identifies you with a number. Your name or specific address will not be recorded anywhere. We are asking hundreds of people these questions at places in the city.  The name and phone number of the person in charge of this study are on this piece of paper. If you have any questions you can contact at				
Q11	Do you agree to participate?		YES 1	
	*IF NO, STOP INTERVIEW		NO 2	
Q12	How old are you?			
	*STOP INTERVIEW IF YOUNGER 1	ΓHAN 18		
Q13	Do you live in Karagnada or elsewhere?		YES 1	
	13.1 IF IN KARAGANDA:	13.1 IF YE	NO 2 <u>ES:</u>	
	What microrayon do you live in?	MICRORA	YON CODE:	
	13.2 IF OUTSIDE Karaganda:  • Where?	13.2 IF O	<u>UTSIDE KARAGANDA</u> : KARAGANDA OBLAST 1	
			OTHER OBLASTS OF KAZAKHSTAN 2	
			LIVES ELSEWHERE IN CENTRAL ASIA 3	
			LIVES OUTSIDE OF CENTRAL ASIA 4	

No.	Questions	Coding categories
Q14	How long have you lived in here / there?	LESS THAN ONE YEAR 0
		NUMBER OF YEARS
		ALL MY LIFE 97
Q15	How many nights in the past three months have you slept outside Karaganda?	NUMBER OF NIGHTS:
Q16	How often do you come to this place?	EVERYDAY 1
	CIRCLE ONLY ONE RESPONSE.	4-6 TIMES PER WEEK 2
		2-3 TIMES PER WEEK 3
		ONE TIME PER WEEK 4
		2-3 TIMES PER MONTH 5
		ONE TIME PER MONTH 6
		LESS THAN ONCE A MONTH 7
		THIS IS MY FIRST VISIT 8
Q17	When did you come to this place the first time?	THIS IS MY FIRST VISIT 1
		WITHIN PAST 4 WEEKS 2
		WITHIN PAST 2-6 MONTHS 3
		WITHIN PAST 7-12 MONTHS 4
		OVER A YEAR AGO 5
Q18	Some people meet new sexual partners at	YES 1
	places like this. Do you believe that people meet new sexual partners here? That is, people they have never had sex with before.	NO 2
Q19	In your opinion, of all the people who came here in the past four weeks, what share are injecting drug users?	All or almost all 1 More than half 2 About half 3 Less than half 4
	READ OPTIONS	Very few 5 None 6
Q20	Have you ever met a new sexual partner here?	YES 1
		NO 2

No.	Questions	Coding categories
Q21	When did you last meet a new sexual partner here?	WITHIN 24 HOURS 1 WITHIN PAST 7 DAYS 2 WITHIN PAST 2-4 WEEKS 3 WITHIN PAST 2-3 MONTHS 4 WITHIN PAST 4-6 MONTHS 5 WITHIN PAST 7-12 MONTHS 6 OVER A YEAR AGO 7 NEVER MET A NEW PARTNER HERE 9
Q22	The last time you had sex with this <u>new</u> partner from this place, did you use a condom?	YES 1 NO 2 DON'T REMEMBER 3 NEVER MET A NEW PARTNER HERE 9
Q23	Now I want to ask you about the people you had sex with in the past 4 weeks. How many different people have you had sex with in the past 4 weeks?	4 WEEK TOTAL
Q24	How many of these people were <u>new</u> sexual partners for you in the past 4 weeks?	4 WEEK NEW
Q25	The last time you had sex with one of these new partners, did you use a condom or not?	YES 1 NO 2
Q26	About how many new sexual partners have you had in the past 12 months?	NO NEW PARTNERS IN PAST 4 WEEKS 9  NONE- NO NEW SEXUAL PARTNERS 0  NUMBER
Q27	Do you have any regular long-term sexual partner or partners? That is, someone with whom you have been having sex at least monthly for a year or more. This could be a spouse or lover or someone else.	YES, HAVE ONE OR MORE REGULAR 1 NO REGULAR 2
Q28	The last time you had sex with a regular partner, did you use a condom or not?	YES 1 NO 2 NO REGULAR PARTNER 9

No.	Questions	Coding categories
Q29	In total, including new sexual partners, regular partners, and any other partners, how many sexual partners have you had in the past 12 months?	NUMBER:
Q30	When was the last time you used a condom?	WITHIN THE PAST 24 HOURS 1  WITHIN THE PAST WEEK 2  WITHIN PAST 4 WEEKS 3  WITHIN PAST 2-6 MONTHS 4  WITHIN PAST 7-12 MONTHS 5  OVER A YEAR AGO 6  NEVER USED A CONDOM 7
Q31	Where did you get the last condom you used?	SHOP 1 PHARMACY 2 KIOSK 3 PARTNER HAD CONDOM 5 FROM A FRIEND 4 RECEIVED FREE OF CHARGE 6 OTHER 7 NEVER USED A CONDOM 9
Q32	Do you have a condom with you?  *IF YES, May I see it?	CONDOM WITH ME BUT YOU CANT SEE 1 YES AND CONDOM SEEN 2 BRAND  NO CONDOM WITH ME 3
Q33	Have you participated in educational programs about AIDS in last 12 months?  IF YES, How many months have passed since the last time you participated?	NO CONDOM WITH ME 3  YES 1  NO 2  MONTHS AGO
Q34	Are you currently employed?	YES, FULLTIME 1 YES, OCCASIONAL / PARTTIME WORK 2 NO, NOT LOOKING FOR WORK 3 NO, LOOKING FOR WORK 4
Q35	Do you currently study?	YES 1 NO 2

No.	Questions		Coding categories				
Q36	We also want to know what you thir drug use in this area. In your opinio common is injection drug use in this 'AREA' REFERS TO THE UNIT WHINTERVIEW CONDUCTED.	n, how s area?	VERY COMMON 1 SOMEWHAT COMMON 2 NOT VERY COMMON 3 DOES NOT OCCUR IN THIS AREA 4 DON'T KNOW 5				2 3 4
Q37	In your opinion, do people who inject socialize here at this place?	ct drugs			DON'T KN	'ES NO IOW	1 2 3
Q38	Have you heard of any place in Kar where people who inject drugs can used syringes for new?		YES 1 NO 2				
Q39	Have you ever been to any of the following places? If yes, was it within the last 4 weeks, between one and six months ago, between seven and 12 months ago, or more than one year ago?  Never <4 weeks 1-6mo 7-12mo >1 yr						
	Private medical clinic	0	1	2	3	4	y.
	State medical clinic	0	1	2	3	4	
	Trust Point	0	1	2	3	4	
	TB Dispensary	0	1	2	3	4	
	Emergency	0	1	2	3	4	
	Infection Hospital	0	1	2	3	4	
	Skin/Venerological Dispensary	0	1	2	3	4	
	Or talk with a:						
	Private venerological Doctor	0	1	2	3	4	
	Private narcological doctor	0	1	2	3	4	
	An outreach/social worker about		4	0	•	4	
	injection drug use	0	1	2	3	4	

No.	Questions	Coding categories
Q41	How many years of education did you receive?	ELEMENTARY (UP TO 7 FORMS) OR NONE 1 INCOMPLETE HIGH (8-9 FORMS) 2 PUBLIC HIGH 3 SPECIAL HIGH (TECHNICAL, PEDAGOGICAL, MEDICAL, ETC.) 4 INCOMPLETE HIGHER 5 HIGHER 6
Q42	Now we would like to ask you some questions about your own experience with injecting drugs. Your answers are completely confidential. Have you ever injected drugs?	YES 1  NEVER INJECTED DRUGS 2  DON'T REMEMBER 3
IF EVE	ER INJECTED DRUGS CONTINUE. IF NEVER I	NJECTED DRUGS, GO TO Q53.
Q43	IF YES, When did you last inject drugs?	WITHIN PAST 7 DAYS 1 WITHIN PAST 2-4 WEEKS 2
	IF NO, CIRCLE CODE 9.  IF CODE 5 or higher (OVER 6 MONTHS AGO) SKIP to Q53	WITHIN PAST 2-3 MONTHS 3
		WITHIN PAST 4-6 MONTHS 4
		WITHIN PAST 7-12 MONTHS 5
		OVER A YEAR AGO 6
		NEVER INJECTED DRUGS 9
Q44	With whom do you usually inject drugs?	Individually 1
	READ OPTIONS	Usually with the same group 2 With different groups 3 Depends on circumstances 4
Q45	Which drug do you inject most often?	RAW OPIUM (HANKA) 1 HEROIN 2
		OTHER3 PHARMACY 1
Q46a	Where did you get the syringe you used the last time you injected drugs?	PHARMACT 1 PURCHASED SOMEWHERE ELSE 2 TRUST POINT 3 FRIEND 4
		OTHER 5 DON'T KNOW/REMEMBER 6

No.	Questions		Codir	ng ca	tego	ries
Q46b	Did you share a syringe the last time you injected drugs?				YES NO	
			DON'T KNOW/RE	MEM	IBER	8
0.47	Description that I and A was also all d		\	/ES	NO	DK
Q47	During the last 4 weeks, did you		Share a syringe with other IDU	1	2	8
	READ EACH QUESTION		Take drugs from common reservoir	1	2	8
	READ EACH QUESTION	Use read	y made drug solution without boiling	1	2	8
			Exchange used for new syringe	1	2	8
Q48	How many times did you inject drug yesterday?	js –				
	How many different syringes did yo yesterday?	u use				
Q49	In the past four weeks, with about how many different people did you share a syringe?		тот	AL: .		
	Of those, how many were people you a syringe with for the first time?	ou shared	NE	EW:		
Q50	Can you get new syringes whenever you want?			ALW	/AYS	1
			SOF	METI NE	MES VER	
Q51	IF 'SOMETIMES' or 'NEVER', why not		NC	) МО	NEY	' 1
	always?		EXCHANGE STATION TOO FA	AR A	WAY	2
	DO <u>NOT</u> PROMPT RESPONDENT		KIOSK OR DRUG STORE TOO F	AR A	WAY	<b>/</b> 3
			POLICE	MEN	ACE	4
			I DON'T THINK IT IS NECESSAR	Y TO	) GE	Т
			NEW S'			
			OTHER			6
			RESPONDENT 'ALWAYS	S' AB	OVE	9
Q52	How long have you been injecting drugs?		NUMBER OF YEA	RS .		
	IF LESS THAN A YEAR, NUMBER MONTHS	OF	NUMBER OF MONT	HS .		

No.	Questions	Coding categorie	es	
ASK C	ASK OF ALL RESPONDENTS, REGARDLESS OF REPORTED DRUG USE.			
Q53	Have you ever been detained by the police for injecting drugs?	YES NO		
Q54	IF YES, Do you think your detainment was registered with the police?		1	
Q55	Do you think you are currently registered with the police as a drug user?  IF YES, When do you think you were registered as a drug user?	YES NO MONTH YEAR		
Q56	Have you ever gone to a narcologist or a narcologist dispensary?	YES NO		
Q57	IF YES, Have you ever been registered with a narcology dispensary?	YES NO		
Q58	IF YES, Do you think you are currently registered with the narcologist dispensary?  IF YES, when were you registered?	YES NO MONTHYEAR		
AIDS is a growing health problem in Karaganda. It is important that we find out how knowledgeable people are about how the virus that causes is transmitted. I would like to ask you your opinion about how the virus that causes AIDS is transmitted.				
Q59	Is it possible to become infected with HIV/AIDS through		8	
	READ EACH QUESTION	, , , ,	8	
		_	8	
		Insect bite 1 2	8	
		Handshake 1 2	8	

No.	Questions		Coding categories
Q60	What ways can people avoid or reduce their chances of getting infected with HIV?	ВОТІ	USE CONDOMS 1  HAVE FEWER PARTNERS 2 H PARTNERS HAVE NO OTHER PARTNERS 3
	Any other ways?		NO CASUAL SEX 4
	DO <u>NOT</u> READ OUT THE ANSWERS.		NO SEX AT ALL 5 NO COMMERCIAL SEX 6
	CIRCLE ALL THAT ARE MENTIONED. MORE THAN ONE ANSWER IS POSSIBLE.		AVOID SHARING NEEDLES 7 AVOID BLOOD TRANSFUSIONS 8 OTHER (SPECIFY) 9
			DON'T KNOW ANY 10
Q61	Can a person who looks healthy be infected with the AIDS virus?		YES 1 NO 2 DON'T KNOW 8
Q62	How many times have you been test in the last 12 months?	ted for HIV	NUMBER OF TIMES TESTED
Q63	The last time you were tested for HIV, was it voluntary or obligatory? That is, was it your choice to be tested or were you obliged to be tested.		VOLUNTARY 1 OBLIGATORY 2 NOT TESTED IN LAST 12 MONTHS 9
ASK V	NOMEN ONLY:		
Q64	Have you received money in exchanin the past 3 months?	ige for sex	YES 1 NO 2
	IF MALE, CIRCLE CODE 9.		MALE RESPONDENT 9
Q65	IF YES, How many different places have you gone to look for clients in the last 4 weeks?		
Q66	IF YES, Where in the city do you go to look for clients?  CAN RECORD UP TO 3 DISTRICT CODES.		PLACES AND THEIR CODES:

No.	Questions	Coding categories
ASK I	MEN ONLY:	
Q67	Have you given money or other gifts to anyone in exchange for sexual service in the past 3 months?  IF FEMALE, CIRCLE CODE 9.	YES 1 NO 2 DON'T REMEMBER 3 FEMALE RESPONDENT 9
Q68	Have you had sex with a man in the past 4 weeks?  IF FEMALE, CIRCLE CODE 9.	YES 1 NO 2 DON'T REMEMBER 3 FEMALE RESPONDENT 9

#### АНКЕТА КЛЮЧЕВОГО ИНФОРМАНТА

Nº	Вопросы		Категории кодирован	ΝЯ
K1	Город		Алматы	1
1	Город		Караганды	2
			Ташкент	3
			Ош	4
K2	Место проведения интервью		Участок в городе	
160				
К3	Номер интервьюера			
K4	Дата (день, месяц, го,	д)		
K5	Пол ключевого инфор	оманта	МУЖСКОЙ	<b>й</b> 1
			ЖЕНСКИЙ	
			ALTOWN	
K6	Тип ключевого инфор	манта:		
			ВВЕДИТЕ КОД:	
		ВОДИТЕЛЬ ТАКСИ 1		
	   ВОЛИТЕЛЬ ОБШЕСТ	ВЕННОГО ТРАНСПОРТА 2	БАРМЕН/ОФИЦИАНТ	16
	родинель овщеот	ДАЛЬНОБОЙЩИК 3		17
		диныновойщик	РАБОТНИК БАНИ/САУНЫ	18
	РАБОТНИК (-ЦА)	КОММЕРЧЕСКОГО СЕКСА		
	, , ,	(PKC) 4	БОМЖ	19
		КЛИЕНТ РКС 5	БЕЗРАБОТНЫЙ	20
		СУТЕНЕР 6	ИНОГОРОДНИЙ (-ЯЯ)	21
			ДВОРНИК	22
	ПОТРЕ	БИТЕЛЬ ИНЪЕКЦИОННЫХ	УБОРЩИК (-ЦА) ПОДЪЕЗДОВ	23
		НАРКОТИКОВ 7	молодежь	24
			житель общежития	25
	РАБОТНІ	ИК НПО / ОБЩЕСТВЕННОЙ	ЖИТЕЛЬ РАЙОНА	26
		ОРГАНИЗАЦИИ 8		
	ı	РАБОТНИК СПИД ЦЕНТРА,		
	H/	АРКОДИСПАНСЕРА, КВД 9		
	РАБОТ	НИК СКОРОЙ ПОМОЩИ 10	ДРУГОЕ	_50
	милицио	ОНЕР / ПОЛИЦЕЙСКИЙ 11		
	РАБОТНИК ЗДРАВ	OOXPAHEHUЯ / AПТЕК 12		
	5505455			
		Ц ЛАРЬКА / МАГАЗИНА 13		
	·	PAGOTHUK HA GASAPE 14		
		УЛИЧНЫЙ ТОРГОВЕЦ 15		

исследовани нашего исслетакже мест, нас большой инфицирован расположени инъекционны информация того, как Епрофилактич Вашего имею отразятся. Ва и от интервы	е. Я представляю	ствлять программы здрав ди встречают новых сексу монных наркотиков. СПИД люди не будут знать, ка вопросов. Скажите, поже артнеров и где мы можем и по профилактике СПИ ко общественно доступны и узнаем о возможно т 5 до 15 минут. Мы не м. Ваши ответы никоим ете отказаться отвечать на ить. Возможно, Вы не полу	воохранения. Целью альных партнеров, а пока еще не стал у к уменьшить шансы алуйста, названия и найти потребителей Да. Нам не нужнаыми местами. После ости осуществления е будем спрашивать образом на Вас не отдельные вопросы учите прямую выгоду		
здравоохран	ения.				
-	озникли какие-либо вопросы, Вы сможете связ исследования, по тел		_, ответственной за		
K7	Вы согласны отвечать на вопросы?		ДА 1		
	*ЕСЛИ НЕТ, ПРЕКРАТИТЕ ИНТЕРВЬЮ.		HET 2		
K8	Сколько Вам лет?				
110	*ЗАВЕРШИТЕ ИНТЕРВЬЮ, ЕСЛИ РЕСПОНДЕНТ МЛАДШЕ 18 ЛЕТ	Точн	ый возраст		
K9	Мы бы хотели узнать места, где люди провод половыми партерами. Это поможет нам плані СПИДа, и сделать доступными презервативы	ировать там программы по	профилактике		
	<ul> <li>В каких местах проводит время молод с новыми половыми партнерами?</li> </ul>	цежь, где молодые люди м	огут познакомиться		
	<ul> <li>В каких местах можно встретить женц услуги за вознаграждение?</li> </ul>	цин или мужчин, предлаган	ощих сексуальные		
	<ul> <li>В какие места ходят одинокие мужчины, приезжие, сезонные рабочие, чтобы найти новых половых партнеров?</li> </ul>				
	• В каких местах люди встречают новых половых партнеров в Вашем районе и вне этого района? В какие места Вашего района могут прийти люди из других районов для поиска новых половых партнеров.				
	ЗАПИШИТЕ НАЗВАНИЕ КАЖДОГО МЕСТА Н	А СТР 4. ПОСЛЕ ЗАВЕРШ	ОТОТЕ ВИНЗ		
	ВОПРОСНИКА ЗАПОЛНИТЕ ФОРМУ МЕСТА	ДЛЯ КАЖДОГО УПОМЯН			
K10	Что Вы думаете о проблеме наркотиков в Вац место употребление инъекционных наркотико	-	ДА 1 HET 2		
K11	За последние 4 недели видели ли Вы выброи шприцы в Вашем районе?	ленные использованные	ДА 1 НЕТ 2		

K12	В каких местах поблизости отсюда можно найти использованные шприцы?		
	ЗАПИШИТЕ НАЗВАНИЕ КАЖДОГО МЕСТА НА СТР 4. ПОСЛЕ ЗАВЕРШЕНИЯ ЭТОГО		
	ВОПРОСНИКА ЗАПОЛНИТЕ ФОРМУ МЕСТА ДЛЯ КАЖДОГО УПОМЯН	ІУТОГО МЕСТА.	
К13	В каких местах поблизости отсюда можно встретить потребителей инъекционных наркотиков?		
	ЗАПИШИТЕ НАЗВАНИЕ КАЖДОГО МЕСТА НА СТР 4. ПОСЛЕ ЗАВЕРИ ВОПРОСНИКА ЗАПОЛНИТЕ ФОРМУ МЕСТА ДЛЯ КАЖДОГО УПОМЯН		
K14	Поблизости отсюда знакомятся ли со своими клиентами женщины, оказывающие сексуальные услуги?	ДА HET	1 2
K15	В каких местах могут быть найдены женщины, оказывающие сексуальн	ные услуги?	
	ЗАПИШИТЕ НАЗВАНИЕ КАЖДОГО МЕСТА НА СТР 4. ПОСЛЕ ЗАВЕРШЕНИЯ ЭТОГО ВОПРОСНИКА ЗАПОЛНИТЕ ФОРМУ МЕСТА ДЛЯ КАЖДОГО УПОМЯНУТОГО МЕСТА.		
K16	Количество мест, указанных ключевым информантом на этом участке ————————————————————————————————————		
	Количество мест, указанных ключевым информантом вне		
	этого участка		

ПРЕДВАРИТЕЛЬНЫЙ СПИСОК СООБЩЕННЫХ МЕСТ. ИСПОЛЬЗУЯ ЭТОТ СПИСОК, СПРОСИТЕ РЕСПОНДЕНТА

Из всех упомянутых Вами мест, назовите, пожалуйста, одно, где больше людей встречают новых половых партнеров?

Из всех упомянутых Вами мест, назовите, пожалуйста, одно, где можно встретить больше потребителей инъекционных наркотиков или использованные шприцы?

Из всех упомянутых Вами мест, назовите, пожалуйста, одно, где можно встретить больше женщины, оказывающих сексуальные услуги?

ПОСЛЕ ТОГО, КАЌ ВЫ ПРИОРИТИЗИРОВАЛИ МЕСТА, ЗАПОЛНИТЕ ФОРМУ МЕСТА ДЛЯ КАЖДОГО МЕСТА, ЗАПИСАННОГО В СПИСКЕ

1	секс . 1	ПИН 2	
2	. 1	2	3
3	. 1	2	3
4	_ 1	2	3
5	_ 1	2	3
6	. 1	2	3
7	. 1	2	3
8	. 1	2	3
9	. 1	2	3
10	_ 1	2	3

#### БЛАНК МЕСТА

S1	Город		Алматы 1
			Караганды 2
			Ташкент 3
			Ош 4
S2	Место проведения интервью		Номер участка
S3	Номер интервьюера / Номе информанта	ер ключевого	/
S4	Номер места в анкете		
S5	Название места		
S6	Названо как приоритетное	место	Где люди встречают новых половых партнеров 1 Потребителей инъекционных наркотиков 2
			Женщин, оказывающих сексуальные услуги 3
			Не приоритетно 9
S7	Адрес этого места и как его найти		
S8	Где расположено это место	)	
			Номер участка
S9	ТИП МЕСТА:		
			*ВВЕДИТЕ КОД :
	01 БAP / KAΦE / PECTOPAI		55-A/112 NoA :
	02 НОЧНОЙ КЛУБ / ДИСКО 03 КАЗИНО	TEKA	15 ТЕРРИТОРИЯ ШКОЛЫ
	03 КАЗИНО 04 ГЕЙ КЛУБ		16 ТЕРРИТОРИЯ КОЛЛЕДЖА /
	05 ГОСТИНИЦА		ПРОФЕССИОНАЛЬНОЙ ШКОЛЫ
	06 БАНЯ / САУНА		17 ТЕРРИТОРИЯ ВУЗА
	07 БИЛЬЯРДНЫЙ ЗАЛ/КЛУ	<b>′</b> Б	•
	08 ИГРОВОЙ ЗАЛ	_	18 ЖЕЛЕЗНОДОРОЖНЫЙ ВОКЗАЛ
	09 КОМПЬЮТЕРНЫЙ КЛУЕ	5	19 АВТОВОКЗАЛ
			20 AЭРОПОРТ
	10 ОБЩЕЖИТИЕ		21 СТОЯНКА ГРУЗОВИКОВ
	11 ЧАСТНАЯ КВАРТИРА/Д	OM	22 CTOЯНКА ТАКСИ
	12 ПОДВАЛ / ЧЕРДАК		23 УЛИЦА 24 ПОДЗЕМНЫЙ ПЕРЕХОД
	13 ЛЕСТНИЧНАЯ ПЛОЩАД		OIVIA 25 DLIHOK
	14 НЕИСПОЛЬЗУЕМОЕ / Б	РОШЕННОЕ ЗДАІ	HUE 26 NAPK / CKBEP
			27 ДРУГОЕ
S10	В этом месте		да нет
			Люди встречают новых половых партнеров 1 2
		Можно на	ийти потребителей инъекционных наркотиков 1 2 Можно найти использованные шприцы 1 2
	Moyuo potnetu:		можно наити использованные шприцы т 2

#### ФОРМА ОЦЕНКИ МЕСТА

Номер

Nº	Вопросы		Категории кодирования
V1	Город		Алматы 1 Караганды 2 Ташкент 3 Ош 4
V2	Расположение места		Код участка
V3	Идентификационный списке	номер места в	
V4	Название места		
V5	Точный адрес		
V6	Укажите маршруты об транспорта, проходяциестом		Автобус
V7	Результат проверки м	<b>неста</b>	МЕСТО НЕ НАЙДЕНО 0 МЕСТО НАЙДЕНО, ПРОВЕДЕНО ИНТЕРВЬЮ 1 МЕСТО НАЙДЕНО, НО В ИНТЕРВЬЮ ОТКАЗАНО 2 МЕСТО ВРЕМЕННО ЗАКРЫТО 3 МЕСТА БОЛЬШЕ НЕТ 4
V8	03 КАЗИНО 04 ГЕЙ КЛУБ 05 ГОСТИНИЦА 06 БАНЯ / САУНА 07 БИЛЬЯРДНЫЙ ЗА 08 ИГРОВОЙ ЗАЛ 09 КОМПЬЮТЕРНЫЙ 10 ОБЩЕЖИТИЕ 11 ЧАСТНАЯ КВАРТИ 12 ПОДВАЛ / ЧЕРДАН	ИСКОТЕКА Л/КЛУБ I КЛУБ IPA/ДОМ ( ОЩАДКА / ПОДЪЕЗД	16 ТЕРРИТОРИЯ КОЛЛЕДЖА / ПРОФЕССИОНАЛЬНОЙ ШКОЛЫ 17 ТЕРРИТОРИЯ ВУЗА 18 ЖЕЛЕЗНОДОРОЖНЫЙ ВОКЗАЛ 19 АВТОВОКЗАЛ 20 АЭРОПОРТ 21 СТОЯНКА ГРУЗОВИКОВ 22 СТОЯНКА ТАКСИ 23 УЛИЦА 24 ПОДЗЕМНЫЙ ПЕРЕХОД

V9	Номер интервьюера		
V10	Дата (ДЕНЬ/МЕСЯЦ)		
V11	День недели	ПОНЕДЕЛЬНИК 1 ВТОРНИК 2 СРЕДА 3 ЧЕТВЕРГ 4 ПЯТНИЦА 5 СУББОТА 6 ВОСКРЕСЕНЬЕ 7	
V12	Время начала интервью	::	
V13	(ПО 24-ЧАСОВОЙ СИСТЕМЕ) Количество людей находящихся на месте на момент прибытия интервьюера	МУЖЧИН: ЖЕНЩИН:	
V14	Количество использованных шприцев, обнаруженных интервьюером на месте		
V15	Пол респондента	МУЖСКОЙ 1 ЖЕНСКИЙ 2	
Здравствуйте. Я работаю в			
Ниже п	ели бы быть уверенными в том, что Вам болы риведены имя и контактный телефон человека ь вопросы, Вы можете обратиться к	де 17 лет. а, отвечающего за данное исследование. Если у , по тел.:	
V16	Вы согласны участвовать?	, по тел ДА 1 НЕТ 2	
V17	Сколько Вам лет?  * ЗАВЕРШИТЕ ИНТЕРВЬЮ, ЕСЛИ РЕСПОНДЕНТ МЛАДШЕ 18 ЛЕТ	Точный возраст	
V18	Сколько лет прошло с тех пор, как оно стало местом для проведения времени?	Менее одного года 0 От 1 до 2 лет 1 От 3 до 5 лет 2 От 6 до 10 лет 3 Более 10 лет 4 Не применимо 9	

V19	Чем здесь занимаются люди?						ДА	HET	30
V 19	ПРОЧИТАЙТЕ СПИСОК					_			
			_			Тьют пиво	1	2	8
	ОБВЕДИТЕ ОДИН КОД ДЛЯ	Пьют крепкие алкогольные напитки Смотрят телевизор и видео			1	2 2	8 8		
	КАЖДОГО ВИДА ДЕЯТЕЛЬНОСТИ			CMOT	рят телевизс	р и видео Танцуют	1	2	8
	ДЕЛТЕЛЬПОСТИ				Спуша	ют музыку	1	2	8
				Игры (ком	пьютерные, а		1	2	8
				p (	,	Едят	1	2	8
					Смотрят стр		1	2	8
V20	Мне сказали, что люди знакомят	СЯ					ДА	HET	30
V Z O	с половыми партнерами в места		-	•	ают здесь н				
	подобных этому. Действительно	ли	сексу	альных пар	отнеров – же	нщин?	1	2	8
			Женц	цины встре	чают здесь н	ЮВЫХ			
	ЗАЧИТАЙТЕ СПИСОК			альных пар			1	2	8
			Mara		10107 07001 111	00111			
					нают здесь н отнеров – му		1	2	8
		'	CERC	альпых пар	этнеров — му	жчип:	'	_	0
			Помо	гает ли кто	-нибудь здес	ъ людям			
				миться?	••••		1	2	8
V21	Знакомятся ли здесь женщины,								
	оказывающие сексуальные услуг	ги со							Да 1
	своими клиентами?	, 00						H	lет 2
								Не зна	
								116 306	110 0
V22	Если ДА,					Мен	нее одн	ного год	a 0
	Сколько лет прошло с того врем								
	в этом месте женщины, оказыва сексуальные услуги, начали иска		;				ОГІД	о 2 лет	1
	клиентов?	ать					От 3 д	до 5 лет	. 2
							От 6 до	о 10 лет	. 3
								е 10 лет	
							DOLLER		
								Не зна	ю 8
ПРОЧІ	ИТАЙТЕ: <b>Давайте поговорим под</b>	робн	ee o	гех, кто пр					
	На ваш взгляд, среди <u>мужчин,</u>			Никто	<u>Меньше</u>	Поло-	<u>Болы</u>		<u>очти</u>
١,٠٥٥	приходящих сюда в "часы пик", ка	кую		<u> </u>	<u>поло-</u>	<u>вина</u>	поло		<u>е/все</u>
V23	часть составляют			4	ВИНЫ	3	ВИНЬ	<u>ol</u>	5
ŀ	(а) Безработные (b) Студенты			<u> </u>	2	3	4		5
	(с) Младше 18 лет			1	2	3	4		5
ŀ	(d) Живут в 10 минутах ходьбы от	сюла		1	2	3	4		5
ŀ	(е) Жители этого района	этоди		1	2	3	4		5
ŀ	(f) Приходят сюда хотя бы раз в н	еделк	0	1	2	3	4		5
ŀ	(g) Пьют здесь алкогольные напит			<u>.</u> 1	2	3	4		5
	(h) Находят здесь новых половых				2	3	4		5
	партнеров			1	۷	3	4		ວ
	(і) Вероятно являются людьми,					_		_	
	употребляющими инъекционные			1	2	3	4		5
	наркотики					·			

	На ваш взгляд, среди <u>женщин</u> ,	Никто	<u>Меньше</u>	Поло-	Больше		<u> ИТР</u>
	приходящих сюда в "часы пик", какую	11/11(10	<u>поло-</u>	<u>вина</u>	<u>поло-</u>	BCE	<u>е/все</u>
V24	часть составляют		<u>вины</u>		<u>вины</u>		
	(а) Безработные	1	2	3	4		5
	(b) Студенты	1	2	3	4		5
	(с) Младше 18 лет	1	2	3	4		5
	(d) Живут в 10 минутах ходьбы отсюда	1	2	3	4		5
	(е) Жители этого района	1	2	3	4		5
	(f) Приходят сюда хотя бы раз в неделю	1	2	3	4		5
	(g) Пьют здесь алкогольные напитки	1	2	3	4		5
	(h) Находят здесь новых половых партнеров	1	2	3	4		5
	(i) Вероятно являются людьми, употребляющими инъекционные наркотики	1	2	3	4		5
	Укажите, пожалуйста, "часы пик" типичные для данного места за последние два		Утро 6-11	День 11-17	Вечер 17-22		очь 2-6
	для данного места за последние два	ПН	1	2	3		4
		BT	1	2	3	_	4
V25	СПРОСИТЕ О ДНЯХ И ВРЕМЕНИ СУТОК	CP	1	2	3		4
	И ОТМЕТЬТЕ НУЖНЫЕ ВАРИАНТЫ	4T	1	2	3		<del>4</del>
	МОЖНО ОТМЕТИТЬ НЕСКОЛЬКО	ПТ	1	2	3		4
	ОТВЕТОВ	СБ	1	2	3	_	<del>7</del> 4
		BC	1	2	3	_	<del>4</del>
V26	Назовите, пожалуйста, максимальное количество мужчин, посещающих данное место в течение суток. Постарайтесь оценить общее количество мужчин, которые приходят от открытия до закрытия.  ПРИ НЕОБХОДИМОСТИ, ЗАЧИТАЙТЕ ВАРИАНТЫ				Ę	11-2	00 5 00 6
V27	Назовите, пожалуйста, максимальное количество женщин, посещающих данное место в течение суток? Постарайтесь оценить общее количество женщин, которые приходят от открытия до закрытия.  ПРИ НЕОБХОДИМОСТИ, ЗАЧИТАЙТЕ ВАРИАНТЫ				Ę	11-2 21-	00 6
V28	Укажите наиболее посещаемые периоды?					Да	Нет
					ЗИМА ВЕСНА ЛЕТО ОСЕНЬ ВДНИКИ ДРУГОЕ	1 1 1 1 1	2 2 2 2 2 2
		Укажите					

V29	Проводилась ли здесь какие-либо мероприятия/действия по профилактике	ДА 1
	СПИД?	HET 2
		Если да, то какие?
V30	Были ли здесь доступны презервативы в	ВСЕГДА 1
	течение последних 12 месяцев?	ИНОГДА 2 НИКОГДА 3
V31	Есть ли здесь сегодня в наличии презервативы? Если ДА, могу ли я их	ДА, НО ВЫ НЕ МОЖЕТЕ ИХ УВИДЕТЬ 1
	увидеть?	ДА, ПРЕЗЕРВАТИВЫ ПОКАЗАНЫ 2
		HET 3
	Назовите общее количество производителей?	
	произведителем.	КОЛИЧЕСТВО ПРОИЗВОДИТЕЛЕЙ ПРЕЗЕРВАТИВОВ:
V32	Можно ли ночью найти /купить	ДА 1
	презервативы недалеко от этого места (не более 10 минут ходьбы отсюда)?	HET 2
	Вы бы хотели, чтобы здесь были	НЕ ЗНАЮ 8
V33	информационные материалы и/или	
	осуществлялись образовательные мероприятия по профилактике СПИДа?	ДА 1   НЕТ 2
		НЕ ПРИМЕНИМО 9
V34	Вы бы хотели, чтобы здесь продавались	ДА 1
	презервативы?	HET 2
		не применимо 9
V35	Что Вы думаете о проблеме наркомании в	ОЧЕНЬ РАСПРОСТРАНЕНО 1
	этом районе? Насколько распространено употребление наркотиков в этом районе?	ОТНОСИТЕЛЬНО РАСПРОСТРАНЕНО 2
	употреоление паркотиков в отом районе.	НЕ ОЧЕНЬ РАСПРОСТРАНЕНО 3
		ВООБЩЕ НЕТ В ЭТОМ РАЙОНЕ 4
V36	Видели ли Вы использованные иглы или шприцы внутри или около этого места за	Да 1
	последние 3 месяца?	Нет 2
V37	Встречаются ли в этом месте люди,	Да 1
	употребляющие инъекционные наркотики?	Нет 2

V38	Сколько времени прошло с тех пор, как в этом месте можно встретить людей,	Менее одного года	0
	употребляющих инъекционные наркотики	От 1 до 2 лет	1
	СПАСИБО ЗА ПОМОЩЬ, ДО СВИДАНИЯ!	От 3 до 5 лет	2
		От 6 до 10 лет	3
		Более 10 лет	4
		Не знаю	8
V39	Наблюдение: Признаки деятельности по профилактике СПИДа, замеченные интервьюером на месте	КОЛ-ВО ИМЕЮЩИХСЯ ПЛАКАТОВ (СПИД)	
		КОЛ-ВО БРОШЮР НА УЧАСТКЕ (СПИД)	
		КОЛИЧЕСТВО ПРЕЗЕРВАТИВОВ, КОТОРОЕ	
		МОЖНО УВИДЕТЬ	

ИНДИВИДУАЛЬНАЯ АНКЕТА

	<u>.                                      </u>		T				
Nº	Вопросы		Категории кодирован	ия			
Q1	Название города		Алматы Караганды Ташкент Ош	2			
Q2	Пол интервьюера и номер		Мужской	1			
			Женский	2			
			Индивидуальный номер интервьюера				
Q3	Последовательный номер индив интервью на месте	видуального					
Q4	Название и идентификационный	і номер					
	места		Идентификационный номер места:				
Q5	Дата (ДД/ММ/ГГ)						
Q6	Время суток (24-часовая систем	иа)	:::				
Q7	Количество людей находящихся	і на месте	МУЖЧИН:				
	во время интервью		ЖЕНЩИН:				
Q8	Количество потребителей инъекционных наркотиков и работниц коммерческого секса, находящихся на месте во время проведения интервью		МУЖЧІ ИСИМЫХ И ПРЕДЛ. СЕКС. УСЛУГИ: О ПРЕДЛАГАЮЩИХ СЕКС. УСЛУГИ: ТОЛЬКО НАРКОЗАВИСИМЫХ:				
	(по мнению интервьюера)		— ЖЕНЩІ	л ЛН			
	ДАЙТЕ ПРИБЛИЗИТЕЛЬНУЮ	НАРКОЗАЕ	ИСИМЫХ И ПРЕДЛ. СЕКС. УСЛУГИ:				
	ОЦЕНКУ	ТОЛЬК	О ПРЕДЛАГАЮЩИХ СЕКС. УСЛУГИ:				
			ТОЛЬКО НАРКОЗАВИСИМЫХ:				
Q9	Q9 Пол респондента		МУЖСКОЙ	1			
			ЖЕНСКИЙ	2			
Q10	Q10 Мнение интервьюера, является ли		ТОЛЬКО НАРКОЗАВИСИМЫЙ (-АЯ)	1			
	респондент наркозависимым ил предоставляет сексуальные усл		ТОЛЬКО ПРЕДОСТ. СЕКС. УСЛУГИ	2			
	деньги	,	И ТО И ДРУГОЕ	3			
			НИ ТО И НИ ДРУГОЕ	4			

Nº	Вопросы		Категории кодирования	
Здравствуйте. Я работаю в				
	х людей, которых мы о у Вас возникли какие-л	•	язаться с, ответственной за	
прове, Q11	дение исследования, п Вы согласны участво *ЕСЛИ НЕТ, ПРЕКРА	вать?	ДА 1 НЕТ 2	
Q12	CVORLYO BOM ROT?			
Q13	Вы живете в Караганды?		ДА 1 HET 2 ЕСЛИ ДА:	
	13.1. Если ДА, то в каком микрорайоне или части города Вы проживаете?	13.1.Микрорайон или часть		
	13.2. Если за пределами Караганды, то где?	13.2.		
			КАРАГАНДИНСКАЯ ОБЛАСТЬ 1 ДРУГАЯ ОБЛАСТЬ КАЗАХСТАНА 2 ДРУГАЯ СТРАНА СРЕДНЕЙ АЗИИ 3 ДРУГАЯ СТРАНА 4	
Q14	Как долго Вы здесь /т	ам/ живете?	МЕНЕЕ ОДНОГО ГОДА 0  КОЛИЧЕСТВО ЛЕТ	
Q15	<ul><li>5 Сколько ночей Вы провели за пределами города за последние три месяца?</li></ul>		ВСЮ ЖИЗНЬ 97 КОЛИЧЕСТВО НОЧЕЙ:	

Q16	Как часто Вы приходите в это место?		КАЖДЫЙ ДЕНЬ	1
	ОБВЕДИТЕ ТОЛЬКО ОДИН ОТВЕТ		В РАЗ В НЕДЕЛЮ	2
			РАЗА В НЕДЕЛЮ I РАЗ В НЕДЕЛЮ	3
			З РАЗА В МЕСЯЦ	4 5
			Н РАЗ В МЕСЯЦ	6
		МЕНЕЕ ОДНОГО	•	7
			ПЕРВЫЙ ВИЗИТ	8
047	Kanaa B.,		ПЕРВЫЙ ВИЗИТ	1
Q17	Когда Вы пришли сюда впервые?	НЕ БОЛЕЕ 4	НЕДЕЛЬ НАЗАД	2
		НА БОЛЕЕ 2-6 M	ІЕСЯЦЕВ НАЗАД	3
		НА БОЛЕЕ 7-12 N	ІЕСЯЦЕВ НАЗАД	4
		БОЛЬ	ЕЕ ГОДА НАЗАД	5
Q18	Некоторые люди встречают новых сексуальных па	отнеров в местах	ДА	1
	подобных этому. Как Вы считаете, встречают ли лк	ди здесь новых	HET	
	сексуальных партнеров, то есть людей, с которыми занимались сексом?	они еще никогда не		_
Q19	Как вы считаете, сколько людей, из посетивших		Все или почти все	1
Q19	данное место за последние четыре недели,			
	являются потребителями инъекционных наркотиков?	Более половины		
		Около половины		
	ЗАЧИТАЙТЕ ВАРИАНТЫ ОТВЕТОВ		Менее половины	4
	SAMITANTE BAPNANTBI OTBETOB		Немногие	5
			Никто	6
Q20	Вы когда-нибудь знакомились здесь с человеком,		ДА	1
	который стал Вашим новым сексуальным		HET	2
	партнером?			
Q21	Когда Вы в последний раз познакомились здесь с новым сексуальным партнером?		4 ЧАСОВ НАЗАД	1
	повым сексуальным партнером:	НЕ БОЛЕ	Е 7 ДНЕЙ НАЗАД	2
		НЕ БОЛЕЕ 2-4	НЕДЕЛЬ НАЗАД	3
		НЕ БОЛЕЕ 2-3 M	ІЕСЯЦЕВ НАЗАД	4
		НА БОЛЕЕ 4-6 M	ІЕСЯЦЕВ НАЗАД	5
		НЕ БОЛЕЕ 7-12 M	ІЕСЯЦЕВ НАЗАД	6
			ЕЕ ГОДА НАЗАД	7
		НИКОГДА НЕ ВСТРЕЧ	ІАЛ ЗДЕСЬ НОВОІ	0
			ПАРТНЕРА	9
Q22	Когда Вы в последний раз занимались сексом с		ДА	1
	<u>этим новым</u> партнером, пользовались ли Вы презервативом?		HET	2
	F		НЕ ПОМНЮ	3
		НИКОГДА НЕ ВСТРЕ	ЧАЛ ЗДЕСЬ НОВОІ ПАРТНЕРА	ГО 9

Q23	Сейчас я бы хотел спросить Вас о людях, с которыми Вы вступали в половые отношения за последние 4 недели. Вспомните, со сколькими разными людьми Вы занимались сексом за последние 4 недели?	ВСЕГО ЗА 4 НЕДЕЛИ
Q24	Сколько из этих людей являлись новыми половыми партнерами за последние 4 недели?	КОЛИЧЕСТВО НОВЫХ ПАРТНЕРОВ ЗА ПОСЛЕДНИЕ 4 НЕДЕЛИ
Q25	В последний раз, когда Вы занимались сексом с одним из этих <u>новых</u> партнеров, Вы пользовались презервативом?	ДА 1 HET 2
	ЕСЛИ ЗА ПОСЛЕДНИЕ 4 НЕДЕЛИ НЕ БЫЛО НОВЫХ ПАРТНЕРОВ, ОТМЕТЬТЕ КОД '9'	НЕ БЫЛО НОВЫХ ПАРТНЕРОВ ЗА ПОСЛЕДНИЕ 4 НЕДЕЛИ 9
Q26	Примерно сколько новых половых партнеров у Вас было в течение последних 12 месяцев?	НЕ БЫЛО НОВЫХ ПОЛОВЫХ ПАРТНЕРОВ 0 КОЛИЧЕСТВО
Q27	У Вас есть постоянный половой партнер(ы), то есть тот (те), с которым Вы вступали в половые отношения как минимум ежемесячно в течение	ДА, У МЕНЯ ЕСТЬ РЕГУЛЯРНЫЙ(Е) ПАРТНЕР(Ы) 1
	последнего года, или более? Это может быть супруг(а), любовник(ца) или кто-то еще.	НЕТ РЕГУЛЯРНОГО ПАРТНЕРА 2
Q28	Использовали ли Вы презерватив при последнем половом акте с Вашим постоянным половым партнером?	ДА 1 HET 2
		НЕТ ПОСТОЯННОГО ПАРТНЕРА 9
Q29	Сколько у Вас было половых партнеров, включая постоянных и новых, в течение последних 12 месяцев?	количество
Q30	Когда вы пользовались презервативом в	НЕ БОЛЕЕ 24 ЧАСОВ НАЗАД 1
	последний раз?	НЕ БОЛЕЕ НЕДЕЛИ НЕЗАД 2
		НЕ БОЛЕЕ 4 НЕДЕЛЬ НАЗАД 3
		НЕ БОЛЕЕ 2-6 МЕСЯЦЕВ НАЗАД 4
		НЕ БОЛЕЕ 7-12 МЕСЯЦЕВ НАЗАД 5
		БОЛЕЕ ГОДА НАЗАД 6
		НИКОГДА НЕ ПОЛЬЗОВАЛСЯ(ЛАСЬ) ПРЕЗЕРВАТИВОМ 7
Q31	Где Вы взяли презерватив, который	В МАГАЗИНЕ 1
	использовали в последний раз?	В АПТЕКЕ 2
		В КИОСКЕ 3
		ПРЕЗЕРВАТИВ БЫЛ У ПАРТНЕРА 4
		У ДРУГА 5
		ПОЛУЧИЛ БЕСПЛАТНО 6
		ДРУГОЕ 7
		НИКОГДА НЕ ПОЛЬЗОВАЛСЯ(ЛАСЬ) ПРЕЗЕРВАТИВОМ 9

Q32	У Вас есть с собой презерватив? *ЕСЛИ ДА, Могу я посмотреть?	ПРЕЗЕРВАТИВ ЕСТЬ, НО Я ЕГО НЕ ПОКАЖУ 1
	Leanu да, wory я посмотреть:	ДА, И ПРЕЗЕРВАТИВ ПОКАЗАН 2
		Производитель
		ПРЕЗЕРВАТИВА С СОБОЙ НЕТ 3
Q33	Принимали ли Вы участие в информационно- образовательных программах по проблеме СПИДа за последние 12 месяцев?	ДА 1 HET 2
	Сколько месяцев прошло после Вашего последнего участия в подобной программе?	КОЛИЧЕСТВО МЕСЯЦЕВ:
Q34	Работаете ли Вы в настоящее время?	ДА, ПОЛНАЯ ЗАНЯТОСТЬ 1
		ДА, СЛУЧАЙНАЯ РАБОТА / НЕПОЛНАЯ ЗАНЯТОСТЬ 2
		НЕТ, И НЕ ИЩУ РАБОТУ З
		НЕТ, ИЩУ РАБОТУ 4
Q35	Учитесь ли Вы в настоящее время?	ДА 1
		HET 2
Q36	Мы бы так же хотели знать о том, что Вы	ОЧЕНЬ РАСПРОСТРАНЕНО 1
	думаете о потреблении наркотиков в этом районе. По Вашему мнению, как сильно	ОТНОСИТЕЛЬНО РАСПРОСТРАНЕНО 2
	распространено потребление инъекционных наркотиков в этом районе?	НЕ ОЧЕНЬ РАСПРОСТРАНЕНО 3
	наркотиков в этом раионе? «РАЙОН» ОБОЗНАЧАЕТ УЧАСТОК, ГДЕ	НЕ РАСПРОСТРАНЕНО ВООБЩЕ 4
	ПРОВОДИТСЯ ИНТЕРВЬЮ	НЕ ЗНАЮ 5
Q37	Как Вы считаете, приходят ли сюда люди,	ДА 1
	употребляющие инъекционные наркотики?	HET 2
		НЕ ЗНАЮ З
Q38	Знаете ли Вы что-нибудь о месте (местах) в	ДА 1
	Караганды, где потребители инъекционных наркотиков могут обменять использованные шприцы на новые?	HET 2

Q39	Бывали ли Вы в следующих местах? Если да, то когда это было в последний раз: 4 недели и менее; от 1 до 6 месяцев; от 7 до 12 месяцев; более года тому назад?						
		Никогда	4 недели и менее	От 1 до 6 месяцев	От 7 до 12 месяцев	Более год	
	Частная мед. клиника	0	1	2	3	4	
	Государственная поликлиника или больница	0	1	2	3	4	
	Пункт доверия	0	1	2	3	4	
	Туберкулезный диспансер	0	1	2	3	4	
	Скорая помощь	0	1	2	3	4	
	Инфекционная больница	0	1	2	3	4	
	Кожно-венерологический диспансер	0	1	2	3	4	
	Или прибегали к услугам:						
	Частного венеролога	0	1	2	3	4	
	Частного нарколога	0	1	2	3	4	
	Социального работника, работающего с потребителями инъекционных наркотиков	0	1	2	3	4	
Q40	Состоите ли Вы с кем-либо в бр (зарегистрированном или незарегистрированном)?	аке		,	,	ДА HET	1 2
Q41	Ваш уровень образования?			НАЧАЛЬНОЕ (ДО 7 КЛАССОВ) ИЛИ НИКАКОГО 1			
			HE3A	КОНЧЕННОЕ	СРЕДНЕЕ (8	-9 КЛАССС	DB) 2
					(	СРЕДНЕЕ	3
				СРЕДНЕЕ СПЕЦИАЛЬНОЕ 4			
				НЕЗАКОНЧЕНООЕ ВЫСШЕЕ			
						ВЫСШЕЕ	6
Q42	Q42 А теперь мы хотели бы задать Вам несколько вопросов о Вашем собственном опыте потребления инъекционных наркотиков. Ваши			ДА 1			
				НИКОГДА НЕ УПОТРЕБЛЯЛ ИНЪЕКЦИОННЫЕ НАРКОТИКИ 2			
	ответы будут сохранены в конфиденциальности. Вы когда-нибудь употребляли наркотики путем инъекций?			иньекц	ионные на	ОТКАЗ	3
	ЕСЛИ ДА, ПРОДОЛЖИТЕ И	ІНТЕРВЬЮ. Е	ЕСЛИ НЕТ, П	ЕРЕХОДИТЕ І	К ВОПРОСУ 5	53	

Q43	ЕСЛИ ДА: Когда Вы в последний раз употребляли наркотики путем инъекций?  ЕСЛИ НЕТ, ОБВЕДИТЕ КОД 9  ЕСЛИ КОД 5 ИЛИ ВЫШЕ (БОЛЕЕ 6 МЕСЯЦЕВ НАЗАД) ПЕРЕХОДИТЕ К ВОПРОСУ 53		НЕ БОЛЕЕ 2-3 МЕСЯЦЕВ НАЗАД 3 НЕ БОЛЕЕ 4-6 МЕСЯЦЕВ НАЗАД 4 НЕ БОЛЕЕ 7-12 МЕСЯЦЕВ НАЗАД 5				2 3 4 5 6 EM
Q44	С кем Вы преимущественно упс инъекционные наркотики?	требляете			Индивид	-	1
					стоянной тучайной		2
	ПРОЧИТАЙТЕ ВАРИАНТЫ			Зависит от	•		4
Q45	Какие наркотики Вы принимаето инъекции наиболее часто?	е путем		ХАНКА (С			1
	THE BONGAN HAVIOUS TOO TACTO.				Г	ЕРОИН	2
	ПРОЧИТАЙТЕ ВАРИАНТЫ		ДРУГОЕ				
Q46A	Откуда был шприц, когда Вы употребляли наркотики путем инъекций в последний раз?		ПОЛУЧИЛ В Г ИСПОЛЬЗОВАЛ І	КУПИЛ В Д ПУНКТЕ ОБМ	1ЕНА ШП ГА/ЗНАК Д	МЕСТЕ ІРИЦЕВ	2 3 4 5
Q46B	В последний раз, когда Вы упот наркотики путем инъекций, поль Вы общей иглой или шприцем?			HE 3HA	АЮ/НЕ П	ДА HET ОМНЮ	1 2 9
Q47	За последние 4 недели Вам	Поли сороди од	25	ДА	HET	Не зн	аю
	доводилось		общим шприцем ими потребителями	1	2	8	
	ПРОЧИТАЙТЕ КАЖДЫЙ ВОПРОС	Забирать нарк емкости	отики из общей	1	2	8	
		Пользоваться раствором без		1	2	8	
		Обменивать ис шприц на новь	спользованный ый	1	2	8	
Q48	Сколько раз Вы употребляли ин наркотики вчера?	ъекционные					
	Сколько разных шприцов Вы ис вчера?	пользовали					

Q49	Со сколькими людьми Вам пришлось пользоваться общим шприцем за последние четыре недели?	ВСЕГО:
	С кем из них Вы делали это впервые?	КОЛИЧЕСТВО НОВЫХ:
Q50	Вы можете достать новый шприц в любой момент, когда Вам это необходимо?	ВСЕГДА 1 ИНОГДА 2 НИКОГДА 3
Q51	ЕСЛИ «ИНОГДА» или «НИКОГДА», то почему не всегда?	НЕТ ДЕНЕГ 1 ПУНКТ ОБМЕНА ШПРИЦИОВ НАХОДИТСЯ ДАЛЕКО 2
	ВАРИАНТЫ НЕ ПРЕДЛАГАТЬ	КИОСК ИЛИ АПТЕКА НАХОДЯТСЯ ДАЛЕКО 3 БОЯЗНЬ ПОЛИЦИИ 4 НЕ СЧИТАЮ НЕОБХОДИМЫМ ПРИОБРЕТАТЬ НОВЫЕ ШПРИЦЫ 5 ДРУГОЕ 6 РЕСПОНДЕНТ ОТВЕЧАЛ ТОЛЬКО «ВСЕГДА» 9
Q52	Сколько лет Вы употребляете инъекционные наркотики?	КОЛИЧЕСТВО ЛЕТ
		КОЛИЧИЕСТВО МЕСЯЦЕВ
СПРА	АШИВАТЬ У ВСЕХ РЕСПОНДЕНТОВ НЕЗАВИО ИЛИ	СИМО ОТ ТОГО, ПОТРЕБЛЯЮТ ОНИ НАРКОТИКИ НЕТ
Q53	Вас когда-нибудь задерживала полиция за потребление инъекционных наркотиков?	ДА 1 HET 2
Q54	ЕСЛИ ДА, как Вы считаете, было ли Ваше задержание зарегистрировано?	ДА 1 HET 2
Q55	ЕСЛИ ДА, как Вы считаете, в настоящее время Вы состоите на учете в полиции как наркопотребитель?	ДА 1 HET 2
	ЕСЛИ ДА, с какого времени Вы состоите на учете в полиции как наркопотребитель?	
		месяц , год
Q56	Вы когда-нибудь обращались или Вас приводили к наркологу или в наркологический диспансер?	ДА 1 HET 2
Q57	ЕСЛИ ДА, то Вы когда-нибудь состояли на учете в наркологическом диспансере?	ДА 1 HET 2
Q58	ЕСЛИ ДА, в настоящее время Вы состоите на учете в наркологическом диспансере?	ДА 1
	ЕСЛИ ДА, с какого времени Вы состоите на учете в наркологическом диспансере?	HET 2
		МЕСЯЦ, ГОД

	ема СПИДа в Караганды станови о ВИЧ/СПИДе и путях его перед						
Q59	Можно ли заразиться СПИДом				Да	Нет	Не знаю
	ПРОЧИТАЙТЕ КАЖДЫЙ ВОПІ	POC	При пол	ювом контакте без затива	1	2	8
				треблении наркотиков шприцом	1	2	8
				вызовании общей посуды ема пищи	1	2	8
			При куп	ании в общем бассейне	1	2	8
			При уку	се насекомого	1	2	8
			При рук	опожатии	1	2	8
Q60	Как можно снизить риск или избежать заражения ВИЧ инфекцией /СПИДом? Какие способы Вы знаете? НЕ ЗАЧИТЫВАЙТЕ ОТВЕТЫ. ОБВЕДИТЕ ВСЕ ДАННЫЕ ОТВЕТЫ. ОТВЕТОВ МОЖЕТ БЫТЬ БОЛЬШЕ ОДНОГО.		ОТК	ИСПОЛЬЗОВ НЕБОЛЬШОЕ КОЛИЧЕСТ ОБА СОХРАНЯТЬ ВЕІ ИЗБЕГАТЬ СЛУЧАЙНЬ ОТКАЗАТЬСЯ АЗАТЬСЯ ОТ УСЛУГ КОМ ИЗБЕГАТЬ СОВМЕСТНОІ ИЗБЕГАТЬ Г ДРУГОЕ (УКАЗАТЬ)	ТВО ПОЛО ПАР ПАРТНЕР РНОСТЬ ДОТ СЕКО МЕРЧЕСЬ ТО ИСПО	ОВЫХ ОТНЕРОВ РА ДОЛЖН ДРУГ ДРУ ВЫХ СВЯЗ СА ВООБ КОГО СЕН ЛЬЗОВАН ШПРИL АНИЯ КРО	2 НЫ ГГУ 3 ЗЕЙ 4 ЩЕ 5 ССА 6 ИИЯ ЦЕВ 7 ОВИ 8
Q61	Может ли человек, имеющий здоровый вид, быть инфицированным ВИЧ/СПИДом?					ДА 1 НЕТ 2 НАЮ 3	
Q62	Сколько раз вы проверялись на ВИЧ/СПИД за последние 12 месяцев?		кол	ичество	) TECTOE		
Q63	Ваша последняя проверка на была добровольной или обяза	тельн	ой (по			БРОВОЛЬ 5ЯЗАТЕЛЬ	
	направлению)? То есть, было выбором или Вас к этому обяз		Вашим	ЗА ПОСЛЕДНИЕ 12 МІ			

вопро	ОСЫ ТОЛЬКО ДЛЯ ЖЕНЩИН:	
Q64	Вступали ли Вы в сексуальные отношения за деньги или другое материальное вознаграждение в течение последних 3 месяцев?  ЕСЛИ РЕСПОНДЕНТ МУЖЧИНА, ОТМЕТЬТЕ КОД 9	ДА 1 НЕТ 2 РЕСПОНДЕНТ-МУЖЧИНА 9
Q65	ЕСЛИ ДА, укажите, пожалуйста, количество мест, где Вы искали клиентов в течение последних четырех недель.	
Q66	ЕСЛИ ДА, укажите места, где Вы искали клиентов.	Место:
ВОПРО	ОСЫ ТОЛЬКО ДЛЯ МУЖЧИН:	
Q67	Платили ли Вы кому-нибудь деньги или делали материальное вознаграждение в другой форме за сексуальные услуги в течение последних 3 месяцев?  ЕСЛИ РЕСПОНДЕНТ ЖЕНЩИНА,	ДА 1 НЕТ 2 НЕ ПОМНЮ 3
	ОБВЕДИТЕ КОД 9	РЕСПОНДЕНТ-ЖЕНЩИНА 9
Q68	Занимались ли Вы сексом с мужчиной в течение последних 4-х недель?	ДА 1
	ЕСЛИ РЕСПОНДЕНТ ЖЕНЩИНА, ОБВЕДИТЕ КОД 9	HET 2 НЕ ПОМНЮ 3
		РЕСПОНДЕНТ-ЖЕНЩИНА 9

СПАСИБО ЗА ВАШУ ПОМОЩЬ!

### Appendix 3 – Follow-up Questionnaires

# KEY INFORMANT CHARACTERISTICS – CAR 2003

No.	Questions	Coding categories
		Almaty 1
		Karaganda 2
K1	Assessment City	Tashkent 3
		Osh 4
K2	Location of Interview	UNIT in city:
140	Later in the North and UKerry later was at North an	
K3	Interviewer Number / Key Informant Number	/
K4	Date	
	Date	//
W.F.	Condon of Kondofonson	MALE 1
K5	Gender of Key Informant	FEMALE 2
	T 616 1.6	
K6	Type of Key Informant:	ENTER CODE:
	TAXI DRIVER 01	E. (12R 6022
	PUBLIC TRANSPORTATION DRIVERS 02	BARMEN/WAITERS 16
	LONG DISTANCE TRUCK DRIVERS 03 SEX WORKER 04	HOTEL STAFF 17
	CLIENT OF SEX WORKER 05	SAUNA STAFF 18
	PIMP 06	
	INJECTION DRUG USER 07	HOMELESS 19
	NON-GOVERNMENTAL ORG (NGO) STAFF 08	UNEMPLOYED 20
	WORKERS OF AIDS CENTER, NARCOLOGICA	NEW ARRIVALS/ TEMPORARY 21
	DISPENSARY, VENEROLOGICAL CLINIC 09	STREET CLEANERS 22
	MEDICAL PERSONNEL 10	STAIRWELL CLEANER 23
	POLICE OFFICER 11	FLAT OWNERS COOP PERSONNEL 24
	HEALTH CARE/ PHARMACY WORKER 12	YOUTH 25
		DORMITORY RESIDENT 26
	MINI-MARKET /SHOP SELLER 13	RESIDENT OF AREA 27
	SELLERS AND WORKERS IN MARKET 14	
	STREET VENDOR 15	OTHER 50

No.	Questions	Coding categories
health new so be a b reduce the na drug in are jus see if betwe You w compl You m in a fe	I am working for the	drugs can be found. AIDS doesn't seem to problem if people don't learn about how to a you a few questions. We want you to tell us sexual partners and where we can reach ow the names of any private residences. We a places are then we will visit those places to be names and locations of sites should take you to provide any identifying information. It be linked back to you. Your participation is estion or completely refuse to participate. It is study, but this city.
K7	Are you willing to participate? *IF NO, STOP INTERVIEW.	YES 1 IF NO, STOP INTERVIEW. NO 2
K8	How old are you?  *STOP INTERVIEW IF RESPONDENT IS YOUNGER THAN 18	———
К9	We want to know where people socialize with the intervill help us plan AIDS prevention programs there and want to know:  Where youth socialize and meet new sexual part.  Where women or men sell sex  Where other people such as single men, gay me to find new sexual partners.  Where people in this unit go to meet new partner want to know where people from outside the unit unit.  K9A. Do you know of any such places? YES	the have condoms available. We especially the specially the special sp
K10	We also want to know what you think about drug use around here. Does injecting drug use occur here (in this unit)?	YES 1 NO 2
	nore (in this unit):	NO Z

No.	Questions	Coding categories
K11	Have you seen any syringes around here in the last 4 weeks?	YES 1 NO 2
K12	Where can syringes be found around here?  *WRITE EACH PLACE NAMED ON THE LIST ON THE NEXT PAGE. AFTER FINISHING THIS QUESTIONNAIRE, FILL OUT A PLACE REPORT FORM FOR EACH PLACE.	
K13	Where can injecting drug users be found around here?  *WRITE EACH PLACE NAMED ON THE LIST ON THE NEXT PAGE. AFTER FINISHING THIS QUESTIONNAIRE, FILL OUT A PLACE REPORT FORM FOR EACH PLACE.	
K14	Do sex workers look for customers around here?	YES 1 NO 2
K15	Where can sex workers be found?  *WRITE EACH PLACE NAMED ON THE LIST ON THE NEXT PAGE. AFTER FINISHING THIS QUESTIONNAIRE, FILL OUT A PLACE REPORT FORM FOR EACH PLACE.	
K16	Number of places named within 10 minute walk of interview location.	
	Number of places named further than a 10 minute walk of interview location.	

#### LIST PLACES NAMED ON LINES BELOW.

For each site named by the Respondent, CIRCLE "1" If the site is located within a 10 minute walk of here and "2" if it is further than a 10 minute walk from here.

1		Further than 10 minute walk from here 2
2	_ 1	2
3	1	2
4	1	2
5	1	2
6	_ 1	2
7	_ 1	2
8	_ 1	2
9	_ 1	2
10	_ 1	2

## KEY INFORMANT REFUSAL FORM - CAR 2003

No.	Questions	Coding categories
K1	Assessment City	Almaty 1 Karaganda 2 Tashkent 3 Osh 4
K2	Location of Interview	UNIT in city:
K3	Interviewer Number	
K4	Date	/
K5	Gender of Key Informant	MALE 1 FEMALE 2
K6	Type of Key Informant:  TAXI DRIVER 01 PUBLIC TRANSPORTATION DRIVER 02 LONG DISTANCE TRUCK DRIVERS 03 SEX WORKER 04 CLIENT OF SEX WORKER 05 PIMP 06  INJECTION DRUG USER 07 NON-GOVERNMENTAL ORG (NGO) STAFF 08 WORKERS OF AIDS CENTER, NARCOLOGICA DISPENSARY, VENEROLOGICAL CLINIC 09 MEDICAL PERSONNEL 10 POLICE OFFICER 11 HEALTH CARE/ PHARMACY WORKER 12  MINI-MARKET /SHOP SELLER 13 SELLERS AND WORKERS IN MARKET 14 STREET VENDOR 15	BARMEN/WAITERS 16 HOTEL STAFF 17 SAUNA STAFF 18  HOMELESS 19 UNEMPLOYED 20 NEW ARRIVALS/ TEMPORARY 21 STREET CLEANERS 22 STAIRWELL CLEANER 23 FLAT OWNERS COOP PERSONNEL 24 YOUTH 25 DORMITORY RESIDENT 26 RESIDENT OF AREA 27 DIFFICULT TO VERIFY TYPE OF INFORMANT 30  OTHER

## PLACE REPORT FORM 2003

	_	Almaty 1
S1	Assessment	Karaganda 2
		Tashkent 3
		Osh 4
S2	Location of Interview	UNIT
S3	Interviewer Number / Key	/
	Informant Number	
S4	Key Informant / Place Report	
54	Number	<del></del>
S5	Name of place	
	Location of place relative to	Within 10 minute walk of here 1
S6	site of key informant	
	interview. The site is	Further than 10 minute walk from here 2
S7	Address of place and how to	
	find it.	
S8	Where is the place located?	LINIT in city (CODE 1.95):
30	Where is the place located? In what unit?	UNIT in city (CODE 1-85):
S9	TYPE OF PLACE:	*ENTER CODE:
	01 BAR/CAFÉ/RESTAURANT	
	02 NIGHTCLUB/DISCO	15 SCHOOL
	03 CASINO	16 COLLEGE/PROFESSIONAL SCHOOL 17 UNIVERSITY CAMPUS/TUTORIAL INSTITUTE
	04 GAY CLUB 05 HOTEL	18 RAILWAY STATION
	06 SAUNA	19 BUS STATION
	07 BILLIARDS	20 AIRPORT
	08 GAME CLUB	21 TRUCK STOP/STAND 22 TAXI STAND
	09 COMPUTER CLUB 10 DORMITORY	23 STREET
	11 PRIVATE APARTMENT/FLA	AT 24 STREET TUNNEL
	12 BASEMENT/ROOF	25 MARKET
	13 STAIRWELLS	26 PARK 27 OTHER (specify):
	14 UNUSED/ ABANDONED BU	JILDING 27 OTTIER (specify).
S10	Is this a place where	YES NO
		People meet sexual partners 1 2
		Drug Injectors can be found 1 2
		Syringes are lying around 1 2
		Sex workers solicit 1 2

## SITE VERIFICATION FORM 2003

**Unique Place Number:** 

No.	Questions	Coding Categories		
V1	City	Almaty Karaganda Tashkent Osh	1 2 3 4	
V2	Location of Site	UNIT CODE:	_	
V3	List ID Number		_	
V4	How many key informants reported this site?		_	
V5	Name of Place		-	
V6	Correct Street Address			
V7	Is this site within a 10 minute walk of  READ LIST  CIRCLE ONE CODE FOR EACH ACTIVITY	YES N A busy road 1 Public transportation stop 1 A trucking route 1 metro stop 1	1O 2 2 2 2	
V8	TYPE OF SITE:  01 BAR/CAFÉ/RESTAURANT 02 NIGHTCLUB/DISCO 03 CASINO 04 GAY CLUB 05 HOTEL 06 SAUNA 07 BILLIARDS 08 GAME CLUB 09 COMPUTER CLUB 10 DORMITORY 11 PRIVATE APARTMENT/FLAT 12 BASEMENT/ROOF 13 STAIRWELLS 14 UNUSED/ ABANDONED BUIL 15 SCHOOL 16 COLLEGE/PROFESSIONAL 17 UNIVERSITY CAMPUS/TUTO	LDING SCHOOL	_	

No.	Questions	Coding Categories
V9	Interviewer Number	
V10	Date (DD/MM/YY)	
V11	Day of the week	MONDAY 1 TUESDAY 2 WEDNESDAY 3 THURSDAY 4 FRIDAY 5 SATURDAY 6 SUNDAY 7
V12	Time of day (24 HOUR CLOCK)	::
V13	Number socializing upon interviewer arrival at place	MEN: WOMEN:
V14	Number of used syringes observed by interviewer at the s	
V15	Gender of respondent	MALE 1 FEMALE 2

Hello. I am working on a study to identify where better health programs are needed in the city. I would like to ask you some questions about this place and the people who come here. The interview should take between 15 and 30 minutes of your time. I won't ask your name or any other identifying information. Your participation is completely voluntary and you may refuse to answer any question or completely refuse to participate. There are no risks to participating but it is possible you may be embarrassed by the questions. You may not benefit directly from this research but the information may help in planning better health program.

This is what we will do with the information you give us. We are asking people these questions at hundreds of places in the city. Your answers will be combined with information about other places like this and will not be reported about this place alone. Your name will not be recorded anywhere and we won't ask any information about you except to make sure you are over 17.

The name and phone number of the person in charge of this study are on this piece of paper. If you have any questions you can contact Tatiana Mihailovna Puryaseva at tel no. 439202.

V16	Do you agree to participate?	YES 1 NO 2
V17	How old are you?  *CONCLUDE INTERVIEW IF RESPONDENT IS YOUNGER THAN 18.	

No.	Questions	Coding Categories		
V18	How many years has this place been in operation as a place w people can pass time?	1 TO 2 YEARS 1 3 TO 5 YEARS 2		
		6 TO 10 YEARS 3 MORE THAN TEN YEARS 4		
		NOT APPLICABLE 9		
V19	Which types of activities take p	lace YES NO DK  Beer Consumed 1 2 8		
	READ LIST  CIRCLE ONE CODE FOR EACH	Hard Alcohol Consumed 1 2 8  TV Or Video Viewing 1 2 8  Dancing 1 2 8  Music 1 2 8  Computer Games/Slot Machines 1 2 8  Eating food 1 2 8  Striptease Show 1 2 8		
V20	I have been told that people socialize at places like this and meet sexual partners here.  READ LIST	PES NO DK  Do men meet new female sexual partners here? 1 2 8  Do women meet new sexual partners here? 1 2 8  Do men meet male (gay) sexual partners? 1 2 8  Does someone onsite facilitates partnerships? 1 2 8  Do staff meet new sexual partners here? 1 2 8		
V21	Do female sex workers solicit customers here?	YES 1 NO 2 DON'T KNOW 8		
V22	IF YES, For how many years h female sex workers solicited customers here?	1 TO 2 YEARS 1 3 TO 5 YEARS 2 6 TO 10 YEARS 3 MORE THAN TEN YEARS 4 DON'T KNOW 8		
READ:	READ: Let's talk in more details about people who come here during the busiest times.			

No.	Questions				Cod	ding Categories
V23	Among men who come here during times how many do you think are:	nen who come here during the busiest w many do you think are:			Some	Most
	(j) Are Unemployed			0	1	2
	(k) Are Students			0	1	2
	(I) Are < Age 18			0	1	2
	(m) Live within a 10 minute walk of here			0	1	2
	(n) Live outside this unit			0	1	2
	(o) Come by car or taxi			0	1	2
	(p) Come by public transportation			0	1	2
	(q) Come here at least once a week			0	1	2
	(r) Drink alcohol here			0	1	2
	(s) Find a new sexual partner while	they are here	9	0	1	2
	(t) Appear to be injection drug user	rs		0	1	2
	(u) Appear to be buying sex (clients	u) Appear to be buying sex (clients)			1	2
	(v) Are homosexual			0	1	2
V24	Among <u>women</u> who come here during the busiest times how many do you think are:			None	Some	Most
	(a) Are Unemployed			0	1	2
	(b) Are Students	(b) Are Students			1	2
	(c) Are < Age 18	(c) Are < Age 18			1	2
	(d) Live within a 10 minute walk of h	(d) Live within a 10 minute walk of here			1	2
	(e) Live outside this unit			0	1	2
	(f) Come by car or taxi	) Come by car or taxi		0	1	2
	(g) Come by public transportation	Come by public transportation		0	1	2
	(h) Come here at least once a week	(		0	1	2
	(i) Drink alcohol here			0	1	2
	(j) Find a new sexual partner while	they are here	9	0	1	2
	(k) Appear to be injection drug user	rs .		0	1	2
	(I) Appear to be selling sex			0	1	2
V25	During a typical week in the last two months, what were the busiest		6-11an		5-10p	m 10pm- 6am
v 25		MON	1	5pm 2	3	4
	time(s) here?	TUES	1	2	3	4
	PROBE FOR DAYS AND TIMES	WED THURS	<u>1</u> 1	2 2	3	4
	OF DAY. MORE THAN ONE ANSWER ALLOWED FOR EACH	FRI	1	2	3	4
	DAY.	SAT SUN	<u>1</u> 1	2 2	3	4
	1	5514	ı			

No.	Questions				Coding Categories		
V26	Approximately how many peop		<10	1			
	(men and women) come here during one of these busy times			-	251-300 8		
			11-25		301-350 9		
	READ OPTIONS, CIRCLE ON CODE	ΝE	26-50		351-400 10		
	CODE		51-100		401-450 11		
			101-150		451-500 12		
			151-200	6	>500 13		
			201-250	7			
V27	During the most recent busy tin about how many men and wom were socializing here?				MEN:		
		111011			WOMEN:		
					YES NO		
V28	What are the busiest times of year?	the			WINTER 1 2		
	year:				SPRING 1 2		
	CAN MARK YES FOR MORE THAN ONE OPTION				SUMMER 1 2		
	THAN ONE OF HON				AUTUMN 1 2		
					HOLIDAYS 1 2		
V29	Have there ever been any						
V23	HIV/AIDS prevention activities this place?	s at			YES 1 NO 2		
			IF YES: What types?				
V29.1	Circle all that apply		ir 165. What types?		Lectures/Seminars 1		
			Pamphlets/ Leaflets 2				
					·		
					Posters 3		
					Distribution of Syringes 4  Condom Distribution 5		
			Othor				
			Other		6		
V30	In the last 12 months, how ofter have condoms been available				ALWAYS 1		
	here?				SOMETIMES 2		
					NEVER 3		
					DON'T KNOW 8		
V31.1	Are there any condoms here today?		YE	ES, E	BUT YOU CANT SEE ONE 1		
	If YES, can I see one?		YES, AND A CONDOM WAS SEEN				

No.	Questions	Coding Categories
1/04.0	10,450   1,500	NO 3
V31.2	If YES, how many different brands of condoms?	NUMBER OF BRANDS:
V31.3	What brands?	Brands seen:
	Circle all that apply	Favorite 1
	choic an that apply	Durex 2
		Pilotos 3
		Two to Tango 4
		Innotex 5
		Vizit 6
		Lifestyle 7
		Context 8
		Desire 9
		Gold Circle 10
		Indian/No Brand 11
		Other 12 No condom seen 99
		No condom seem 33
V32	Is it possible for someone to find a	YES 1
	condom within 10 minutes of leaving this place at night?	NO 2
		DON'T KNOW 8
V33	Would you be willing to sell	YES 1
	condoms here?	NO 2
		NOT APPLICABLE 9
V34	We also want to know what you	VERY COMMON 1
	think about drug use in this unit. How common is injection drug use	
	in this unit?	
		NOT VERY COMMON 3  DOES NOT OCCUR IN THIS AREA 4
		DOES NOT OCCUR IN THIS AREA 4
V35	Have you seen used syringes I	YES 1
	around inside or outside this place	TES 1
	in the past 3 months?	NO 2
V36	Is this a place where drug injectors	VEG 4
	can be found?	TES I
		NO 2

No.	Questions	Coding Categorie	es
V37	IF YES, For how many years he this been a place where drug injectors can be found?	1 TO 2 YEARS 3 TO 5 YEARS	0 1 2 3 4 8
V38	Observation: Evidence of AIDS educational activities noted by interviewer at the site	NUMBER OF AIDS POSTERS DISPLAYED  NUMBER OF AIDS BROCHURES AT SITE  NUMBER OF CONDOMS VISIBLE	

# SITE VERIFICATION REFUSAL FORM 2003

**Unique Place Number:** 

No.	Questions		Coding Categories
B1	City		Almaty 1 Karaganda 2 Tashkent 3 Osh 4
B2	Location of Site		UNIT CODE:
В3	List ID Number		
B4	How many key informants reported this site?		
B5	Name of Place		
В6	Correct Street Address		
В7	Outcome of place verification	PL	PLACE NOT FOUND / INCORRECT ADDRESS 1 PLACE FOUND BUT NOT WILLING RESPONDENT 2 PLACE CLOSED TEMPORARILY 3 ACE CLOSED PERMANENTLY / NO LONGER A PLACE 4 PLACE ALREADY NAMED / DUPLICATE 5
B8	TYPE OF SITE:  01 BAR/CAFÉ/RESTAURANT 02 NIGHTCLUB/DISCO 03 CASINO 04 GAY CLUB 05 HOTEL 06 SAUNA 07 BILLIARDS 08 GAME CLUB 09 COMPUTER CLUB 10 DORMITORY 11 PRIVATE APARTMENT/FI 12 BASEMENT/ROOF 13 STAIRWELLS 14 UNUSED/ ABANDONED I 15 SCHOOL	_AT	*ENTER CODE:  16 COLLEGE/PROFESSIONAL SCHOOL 17 UNIVERSITY CAMPUS/TUTORIAL INSTITUTE 18 RAILWAY STATION 19 LONG DISTANCE BUS STATION 20 AIRPORT 21 TRUCK STOP/STAND 22 TAXI STAND 23 STREET 24 STREET TUNNEL 25 MARKET 26 PARK 27 OTHER (specify):
B9	Interviewer Number		
B10	Date (DD/MM/YY)		//

# QUESTIONS FOR RESPONSIBLE PERSON AT SITE 2003

No.	Questions	Coding Categories			
	ROUGH D5 ARE TO BE COMPLETE ITERVIEWER.	D BY FIELD COORDINA	TOR BE	EFORE THIS FORM IS GIVEN	то
D1				ALMATY	1
	Name of HTA			KARAGANDA	2
				TASHKENT	3
				OSH	4
D2	Site Number				
D3	Date (DD/MM/YYYY)			//	
D4	Site Name				
D5	Correct Address				
D6	We would like to give the name and a groups <specify organizations<="" td=""><td>S AND GROUPS&gt; that</td><td></td><td colspan="2">YES, I HAVE AUTHORITY</td></specify>	S AND GROUPS> that		YES, I HAVE AUTHORITY	
	plan AIDS prevention programs in this		СО	ULD NOT FIND A PERSON WI	ТН
		authority to approve giving the name and te to groups so that they can include this site vention program planning?		AUTHORITY TO INTERVIEW	12
	IF THE PERSON DOES NOT HAVE THE AUTHORITY, CONCLUDE INTERVIEW AND TRY TO IDENTIFY SOMEONE WHO HAS THE AUTHORITY.				
ASK TI	ASK THE FOLLOWING QUESTIONS TO SOMEONE WITH AUTHORITY.				
D7	Would you be willing to have a persor program talk with you about including		ntion	YES, WILLING	3 1
	prevention program in this area?	tine one in a new / nee		NC	2
D8	Could someone from an organization contact you about possibly having co		e?	YES, CONDOMS	3 1
				NC	2
D9	May we give your name to these grou	ips as a contact person?		YES, NAME	∄ 1
	IF YES:NAME:			NC	2

# QUESTIONNAIRE FOR INDIVIDUALS SOCIALIZING AT SITES 2003

No.	Questions	Coding categories
Q1	Name of City	Almaty 1 Karaganda 2
		Tashkent 3
		Osh 4
Q2	Interviewer Gender and Number	MALE 1
		FEMALE 2
		INTERVIEWER ID NUMBER:
Q3	Individual Interview Consecutive Number at site	
Q4	Name of site and Unique Identification Number	
		UNIQUE ID NUMBER:
Q4.1	Location of Site	Primary Sampling Unit:
Q5	Date (DD/MM/YY)	/
Q6	Time of day (24 hour clock)	::
	NOTE: Fill in at the start of each interview	
Q7	Number socializing at place before interview	MEN:
	NOTE: Fill in at the start of each interview	WOMEN:
Q8	Gender of respondent	MALE 1 FEMALE 2
Q9	Interviewer opinion if respondent is IDU and/or	IDU ONLY 1
	CSW	
		CSW ONLY 2
		BOTH IDU AND CSW 3
		NEITHER 4

No.	Questions	Coding autogories
INO.	Questions	Coding categories

Hello. I am working on a study to identify where better health programs are needed in the city. I would like to ask you some questions about your behavior, including sexual behavior and other risky behaviors. The interview should take between 20 and 30 minutes of your time and you will not be contacted in the future. I won't ask your name or any other identifying information. Your answers will be kept confidential. Your participation is completely voluntary and you may refuse to answer any question or completely refuse to participate. There are no risks to participating but it is possible you may be embarrassed by the questions. You may not benefit directly from this research but the information may help in planning better health programs.

This is what we will do with the information you give us. Your answers will be recorded on a paper that only identifies you with a number. Your name or specific address will not be recorded anywhere. We are asking hundreds of people these questions at places in the city.

The name and phone number of the person in charge of this study are on this piece of paper. If you have any questions you can contact Tatiana Mihailovna Puryaseva at tel no. 439202.

Q10	Do you agree to participate?		YES	1
	*IF NO, STOP INTERVIEW		NO	2
Q11	How old are you?  *STOP INTERVIEW IF YOUNGER THAN 1	8		
Q12	Do you live in Karaganda?	YES	3 1	
	12.1 IF YES :  What microrayon do you live in?	NO 12.		
		MIC	CRORAYON	
		СО	DE OF UNIT:	
	12.2 IF OUTSIDE Karaganda:  • Where?	<u>12.2</u>	2	
			KARAGANDA OBLAST	1
			OTHER OBLASTS OF KAZAKHSTAN	
				3
			LIVES OUTSIDE OF CENTRAL ASIA	4
	12.3		Distance	e:
	How far away do you live from this		10 minute walk or less	1
	place (place of interview)?		Further than 10 minute walk	2
	4			_

No.	Questions	Coding categories
Q13	How long have you lived in here / there?	LESS THAN ONE YEAR 0 NUMBER OF YEARS ALL MY LIFE 97
Q14	How many nights in the past three months have you slept outside Karaganda?	NUMBER OF NIGHTS:
Q15	How often do you come to this place? CIRCLE ONLY ONE RESPONSE.	EVERYDAY 1 4-6 TIMES PER WEEK 2 2-3 TIMES PER WEEK 3 ONE TIME PER WEEK 4 2-3 TIMES PER MONTH 5 ONE TIME PER MONTH 6 LESS THAN ONCE A MONTH 7 THIS IS MY FIRST VISIT 8
Q16	In the past seven days and nights, including today, how many days did you come here?	Enter Number From 1-7:
Q17	When did you come to this place the first time?	THIS IS MY FIRST VISIT 1 WITHIN PAST 4 WEEKS 2 WITHIN PAST 2-6 MONTHS 3 WITHIN PAST 7-12 MONTHS 4 OVER A YEAR AGO 5
Q18	How did you come to this site today?	Walked 1 By Car 2 By Public Transportation 3
Q19	Some people meet new sexual partners at places like this. Do you believe that people meet new sexual partners here? That is, people they have never had sex with before.	YES 1 NO 2
Q20	Why did you come to this site today?  READ OPTIONS	YES NO TO DRINK ALCOHOL? 1 2 TO MEET A SEXUAL PARTNER? 1 2 TO SOCIALIZE WITH FRIENDS? 1 2
Q21	Have you ever met a new sexual partner here?	YES 1 NO 2

No.	Questions	Coding categories
Q22	When did you last meet a new sexual partner here?	WITHIN 24 HOURS 1 WITHIN PAST 7 DAYS 2 WITHIN PAST 2-4 WEEKS 3 WITHIN PAST 2-3 MONTHS 4 WITHIN PAST 4-6 MONTHS 5 WITHIN PAST 7-12 MONTHS 6 OVER A YEAR AGO 7
Q23	The last time you had sex with this <u>new partner</u> from this place, did you use a condom?	YES 1 NO 2 DON'T REMEMBER 3
Q24	Now I want to ask you about the people you had sex with in the past 4 weeks. How many different people have you had sex with in the past 4 weeks?	4 WEEK TOTAL
Q25	How many of these people were <u>new</u> sexual partners for you in the <u>past 4 weeks</u> ?	4 WEEK NEW
Q26	The last time you had sex with one of these new partners, did you use a condom or not?	YES 1 NO 2 NO NEW PARTNERS IN PAST 4 WEEKS 9
Q27	If NO, why did you not use a condom with your last new partner?  DO NOT READ CHOICES. CIRCLE ALL THAT APPLY.	Partner protested 1 do not like condoms 2 I trust my partner 3 I am afraid my partner suspects me 4 Another contraceptive 5 Condoms are too expensive 6 Did not have them at hand 7 Condoms do not protect against STDs /AIDS 8 Low quality condoms / condoms break 9 Other10
Q28	In the past <u>four weeks</u> , how often did you use condoms with new sexual partners?	Always 1 Sometimes 2 Never 3 No new partners in past 4 weeks 9

No.	Questions	Coding categories
Q29	About how many new sexual partners have you had in the past 12 months?	NONE- NO NEW SEXUAL PARTNERS 0  NUMBER
Q30	Do you have any regular long-term sexual partner or partners? That is, someone with whom you have been having sex at least monthly for a year or more. This could be a spouse or lover or someone else.	YES, HAVE ONE OR MORE REGULAR 1 NO REGULAR 2
Q31	The last time you had sex with a regular partner, did you use a condom or not?	YES 1 NO 2
Q32	Have you ever had a condom break in the past 12 months?	Yes 1 No 2 I don't use condoms 3 No partners in the past 12 months 4
Q33	In total, including new sexual partners, regular partners, and any other partners, how many sexual partners have you had in the past 12 months?	NUMBER:
Q34	Of these people you had sex with in the past 12 months, what is the age of the youngest and oldest person you had sex with in the past 12 months?  IF ONLY ONE PARTNER, MARK SAME AGE IN OLDEST AND YOUNGEST. ESTIMATE AGE IF NECESSARY. CODE 97 IF NO PARTNERS IN PAST 12 MONTHS.	YOUNGEST: OLDEST:
Q35	When was the last time you used a condom?	WITHIN THE PAST 24 HOURS 1 WITHIN THE PAST WEEK 2 WITHIN PAST 4 WEEKS 3 WITHIN PAST 2-6 MONTHS 4 WITHIN PAST 7-12 MONTHS 5 OVER A YEAR AGO 6 NEVER USED A CONDOM 7

No.	Questions		Coding categories
Q36	Where did you get the last condom you used?		SHOP 1
	, , <u></u>		PHARMACY 2
			KIOSK 3
			PARTNER HAD CONDOM 4
			FROM A FRIEND 5
		REC	EIVED FREE OF CHARGE 6
		BAR/NIGHTC	LUB/RESTAURANT/HOTEL 7
			OTHER 8
027	What brand of the last condens you used?	Favorite 1	Context 8
Q37	What brand of the last condom you used?	Durex 2	Desire 9
		Pilotos 3	Gold Circle 10
		Two to Tango 4	Indian/No Brand 11
		Innotex 5	Other 12
		Vizit 6	Don't Remember / Don't
		Lifestyle 7	Know 13
Q38	Do you have a condom with you?		
			I ME BUT YOU CAN'T SEE 1
	*IF YES, May I see it?		YES AND CONDOM SEEN 2
			NO CONDOM WITH ME 3
Q38.1	IF CONDOM SEEN, BRAND:		Favorite 1
	Can circle more that one brand, if multiple		Durex 2
	brands seen.		Pilotos 3
			Two to Tango 4
			Innotex 5
			Vizit 6
			Lifestyle 7
			Context 8
			Desire 9
			Gold Circle 10
			Indian / No Brand 11
		Other	12
Q39	In your opinion, what do you think is a reasonable price (in Tenge) for a condom?		Tenge

No.	Questions	Coding categories
Q40	Have you heard or seen any information about HIV/AIDS in the last 12 months?	YES 1 NO 2
Q40.1	If YES, From what source did you receive this information about the HIV/AIDS virus?	YES NO
	READ OPTIONS.	TV 1 2
		Radio 1 2
		Newspapers/Magazines 1 2
		Leaflets/Posters 1 2
		Friend or relative 1 2
		Doctor/health worker 1 2
		In education places (school) 1 2
		Outreach Worker 1 2
		Other12_
		YES, FULLTIME 1
Q41	Are you currently employed?	YES, OCCASIONAL / PARTTIME WORK 2
		NO, NOT LOOKING FOR WORK 3
		NO, LOOKING FOR WORK 4
Q42	Do you currently study?	YES 1
		NO 2
Q43	Are you married or living in union with	YES 1
	someone?	NO 2
Q44	How many years of education did you	ELEMENTARY (UP TO 7 FORMS) OR NONE 1
	receive?	INCOMPLETE HIGH (8-9 FORMS) 2
		PUBLIC HIGH 3
		SPECIAL HIGH (TECHNICAL,
		PEDAGOGICAL, MEDICAL, ETC.) 4
		INCOMPLETE HIGHER 5
		HIGHER 6
Q45	We also want to know what you think about	VERY COMMON 1
	drug use in this area. In your opinion, how	SOMEWHAT COMMON 2
	common is injection drug use in this area?	NOT VERY COMMON 3
	'AREA' REFERS TO THE UNIT WHERE	DOES NOT OCCUR IN THIS AREA 4
	INTERVIEW CONDUCTED.	DON'T KNOW 5

No.	Questions	Coding categories
Q46	In your opinion, do people who inject drugs socialize here at this place?	YES 1 NO 2
		DON'T KNOW 3
Q47	Have you heard of any place in Karaganda where people who inject drugs can exchange used syringes for new?	YES 1 NO 2
Q48	Now we would like to ask you some questions about your own experience with injecting drugs. Your answers are completely confidential. Have you ever injected drugs?	YES 1 NEVER INJECTED DRUGS 2 REFUSED TO ANSWER 3
IF EVE	ER INJECTED DRUGS CONTINUE. IF NEVER IN	JECTED DRUGS, GO TO Q60.
Q49	IF YES, When did you last inject drugs?	WITHIN PAST 7 DAYS 1 WITHIN PAST 2-4 WEEKS 2
	IF NO, CIRCLE CODE 9.	WITHIN PAST 2-3 MONTHS 3
	IF CODE 5 or higher (OVER 6 MONTHS AGO) SKIP to Q60	WITHIN PAST 4-6 MONTHS 4 WITHIN PAST 7-12 MONTHS 5
		OVER A YEAR AGO 6
Q50	With whom do you usually inject drugs?  READ OPTIONS	Individually 1 Usually with the same group 2 With different groups 3 Depends on circumstances 4
Q51	Which drug do you inject most often?	RAW OPIUM (HANKA) 1
		HEROIN 2
		OTHER3
Q52	Where did you get the syringe you used the last time you injected drugs?	PHARMACY 1 PURCHASED SOMEWHERE ELSE 2 TRUST POINT 3
		FRIEND 4
		OTHER 5 DON'T KNOW/REMEMBER 6
Q53	Did you share a syringe the last time you	YES 1
QUU	injected drugs?	NO 2
		DON'T KNOW/REMEMBER 3

No.	Questions		Coding categories
			YES NO DK
Q54	During the last 4 weeks, did you		Share a syringe with other IDU 1 2 8
			Take drugs from common reservoir 1 2 8
	READ EACH QUESTION	Use ready	y made drug solution without boiling 1 2 8
			Exchange used for new syringe 1 2 8
Q55	How many times did you inject of yesterday?	drugs	
	How many different syringes did yesterday?	d you use	
Q56	In the past four weeks, with abo		TOTAL:
	Of those, how many were peopl a syringe with for the first time?		NEW:
Q57	Can you get new syringes when	never you	ALWAYS 1
	want?	·	SOMETIMES 2
			NEVER 3
Q58	IF 'SOMETIMES' or		NO MONEY 1
	'NEVER', why not always?		EXCHANGE STATION TOO FAR AWAY 2
	DO <u>NOT</u> PROMPT RESPONDENT.		KIOSK OR DRUG STORE TOO FAR AWAY 3
			POLICE MENACE 4
		I DON'I THINK I	T IS NECESSARY TO GET NEW SYRINGES 5
		1	OTHER6
Q59	How long have you been injection	ng drugs?	NUMBER OF YEARS
	IF LESS THAN A YEAR, NUME	BER OF	NUMBER OF MONTHS
	MONTHS		
ASK C	DF ALL RESPONDENTS, REGAI ⊺		PORTED DRUG USE.
Q60	Have you ever been detained by injecting drugs?	y the police for	YES 1 NO 2
Q61	IF YES, Do you think your detai registered with the police?	inment was	YES 1 NO 2
Q62	Do you think you are currently re	egistered with	YES 1
	the police as a drug user? IF YES, When do you think you	were	NO 2
	registered as a drug user?		MONTH YEAR

No.	Questions		Coding categorie	es
Q63	Have you ever gone to a narcologist or a narcologist dispensary for injecting drugs?		YES NO	
Q64	IF YES, Have you ever been registern narcology dispensary as a drug user		YES NO	
Q65	IF YES, Do you think you are curren registered with the narcologist dispe a drug user? IF YES, when were you registered?		YES NO MONTH YEAR	
Q66	Do you think that HIV/AIDS is a prob Alamty?	olem in	SERIOUS PROBLEM SOMEWHAT OF A PROBLEM NOT A PROBLEM AT ALL DON'T KNOW	1 2 3 4
people			portant that we find out how knowledgeable d. I would like to ask you your opinion about how	
Q67	Is it possible to become infected with HIV/AIDS through READ EACH QUESTION	1	Sexual contact without condom 1 2 Injecting drugs with shared syringe 1 2 Eating from common dish 1 2 Swimming in common pool 1 2 Insect bite 1 2 Handshake 1 2	8 8 8 8 8
Q68	What ways can people avoid or reduce their chances of getting infected with HIV?  Any other ways?  DO NOT READ OUT THE ANSWERS.  CIRCLE ALL THAT ARE MENTIONED.  MORE THAN ONE ANSWER IS POSSIBLE.		USE CONDOMS  HAVE FEWER PARTNERS H PARTNERS HAVE NO OTHER PARTNERS NO CASUAL SEX NO SEX AT ALL NO COMMERCIAL SEX AVOID SHARING NEEDLES AVOID BLOOD TRANSFUSIONS SPECIFY)  DON'T KNOW ANY	3 4 5 6 7 8 9
Q69	In your opinion, how effective are co preventing STIs including HIV?	ndoms in	Very effective Somewhat effective Not very effective No effective at all Don't know	1 2 3 4

No.	Questions	Coding categories
Q70	In your opinion, how likely do you think you are	Very likely 1
Q. 0	of contracting the HIV/AIDS virus?	Somewhat likely 2
		Not very likely 3
		No risk 4
		Don't know 5
Q71	Can a person who looks healthy be infected	YES 1
	with the AIDS virus?	NO 2
		DON'T KNOW 3
	Where in Karaganda oon a paraan haya blaad	Center of AIDS 1
Q72	Where in Karaganda can a person have blood drawn from a vein an HIV test?	Venerological/Dermatological Dispensary 2
		Clinic / Hospital 3
		Don't Know 4
		Other5
Q73	How many times have you had blood drawn	NUMBER OF TIMES TESTED
	from your vein for an HIV test in the last 12 months?	Not tested in last 12 months 0
Q74	The last time you were tested for HIV,	VOLUNTARY 1
	was it voluntary or obligatory? That is, was it your choice to be tested or were you obliged to be tested.	OBLIGATORY 2
Q75	Last time you were tested for HIV, did you	YES 1
	receive explanation about ways of transmission and other information about HIV (counseling)?	NO 2
Q76	Would you be interested in getting an HIV test	YES 1
	voluntarily if it will be anonymous?	NO 2
Q77	Have you ever heard of diseases or infections	YES 1
	that can be transmitted through sexual intercourse (STDs)?	NO 2

No.	Questions		Coding categories	
Q78	would lead you to think that someone has such a disease or infection?  Any others?  (CIRCLE ALL THAT ARE MENTIONED. MORE THAN ONE ANSWER IS POSSIBLE.		LOWER ABDOMINAL PAIN 1 GE FROM VAGINA (WOMAN) /PENIS (MAN) 2 ITCHING IN GENITAL AREA 3 BURNING PAIN ON URINATION 4 PAIN DURING INTERCOURSE 5 GENITAL ULCERS/OPEN SORES 6 INFLAMMATION IN GENITAL AREA 7 BLOOD IN URINE 8	
	DO NOT READ OUT THE SYMPTOMS.)		FAILURE TO PASS URINE 9	
		INARII ITY TO	LOSS OF WEIGHT 10 CONCEIVE (WOMAN) / IMPOTENCE (MAN) 11	
		NO SYMPTOM		
			DON'T KNOW 13	
			REFUSED 14	
			OTHER (SPECIFY)15	
ASK V	WOMEN ONLY:			
Q79	Have you received money in the past 3 months?	exchange for sex	YES 1 NO 2	
			Respondent is male 9	
Q80	IF YES, How many different gone to look for clients in the			
Q81	IF YES, Where in the city do look for clients?	you usually go to	Code of Units:	
	CAN RECORD UP TO 3 DIS	STRICT CODES.		
Q82	Last time you received mone sex, did you use a condom?		YES 1 NO 2	
Q83	If YES, who suggested using a condom?		Myself 1	
			My partner 2 My partner and I 3	
			Do not remember 4	

No.	Questions		Coding categories
Q84	If NO, why did you not use a	condom?	Partner protested 1 I do not like condoms 2 I trust my partner 3 I am afraid my partner suspects me 4 Another contraceptive 5 Condoms are too expensive 6 Did not have them at hand 7 Condoms do not protect against STDs/AIDS 8 Low quality condoms / condoms break 9 Other 10
Q85	In the past 4 weeks, have you had any symptoms	SYMPTOMS  Lower abdominal pain (not dependent on menstruation)? 1  Unusual discharge? 1  Sores? 1	
Q86	IF ANY SYMPTOMS:  Did you receive treatment for these symptoms in the past 4 weeks from		YES NO SELF TREATMENT? 1 2 PRIVATE PHYSICIAN OR CLINIC? 1 2 PUBLIC CLINIC OR HOSPITAL? 1 2 DID NOT RECEIVE TREATMENT? 1 2
ASK I	MEN ONLY:	1	
Q87	Have you given money or of in exchange for sexual servi months?		YES 1 NO 2 DON'T REMEMBER 3 Respondent Women 9
Q88	Have you had sex with a maweeks?	in in the past 4	YES 1 NO 2 DON'T REMEMBER 3
Q89	In the past 4 weeks, have you had		SYMPTOMS YES NO Pain on urination? 1 2 Unusual discharge? 1 2 Sores? 1 2
Q90	IF ANY SYMPTOMS:  Did you receive treatment for these symptoms in the past 4 weeks from		YES NO SELF TREATMENT? 1 2 PRIVATE PHYSICIAN OR CLINIC? 1 2 PUBLIC CLINIC OR HOSPITAL? 1 2 DID NOT RECEIVE TREATMENT? 1 2

# АНКЕТА КЛЮЧЕВОГО ИНФОРМАНТА 2003 г

Nº	Вопросы		Категории кодирования
K1			Алматы 1
	Город		Караганды 2
			Ташкент 3
			Ош 4
K2	Место проведения интервью		Участок в городе
К3	Номер интервьюера /	Номер ключевого информанта	/
K4	Дата (день, месяц, го,	ם)	//
K5	Пол ключевого ин	форманта	МУЖСКОЙ 1 ЖЕНСКИЙ 2
K6	Тип ключевого инфор	манта:	ВВЕДИТЕ КОД:
		ВОДИТЕЛЬ ТАКСИ 1	
	ВОЛИТЕЛЬ ОБШЕСТ	ВЕННОГО ТРАНСПОРТА 2	БАРМЕН/ОФИЦИАНТ 16
	ээд г	ДАЛЬНОБОЙЩИК 3	РАБОТНИК ГОСТИНИЦЫ 17
			РАБОТНИК БАНИ/САУНЫ 18
	РАБОТНИК (-ЦА)	КОММЕРЧЕСКОГО СЕКСА	
		(PKC) 4	БОМЖ 19
		КЛИЕНТ РКС 5	БЕЗРАБОТНЫЙ 20
		СУТЕНЕР 6	ИНОГОРОДНИЙ (-ЯЯ) 21
			ДВОРНИК 22
	ПОТРЕ	БИТЕЛЬ ИНЪЕКЦИОННЫХ	УБОРЩИК (-ЦА) ПОДЪЕЗДОВ 23
		НАРКОТИКОВ 7	РАБОТНИК КСК 24
			МОЛОДЕЖЬ 25
	РАБОТНИ	1К НПО / ОБЩЕСТВЕННОЙ	житель общежития 26
		ОРГАНИЗАЦИИ 8	ЖИТЕЛЬ РАЙОНА 27
	НАР ВЕНЕРОЛОГИ'	РАБОТНИК СПИД ЦЕНТРА, КОДИСПАНСЕРА, КОЖНО- ЧЕСКОГО ДИСПАНСЕРА 9 НИК СКОРОЙ ПОМОЩИ 10	
	милицис	ЭНЕР / ПОЛИЦЕЙСКИЙ 11	ДРУГОЕ50
	РАБОТНИК ЗДРАВО	ООХРАНЕНИЯ / АПТЕК 12	
	ПРОДАВЕІ	Ц ЛАРЬКА / МАГАЗИНА   13	
	•	РАБОТНИК НА БАЗАРЕ 14	
		УЛИЧНЫЙ ТОРГОВЕЦ 15	

	_				
Nº	Вопросы		Ka	атегории кодирования	
иссле иссле мест, пробл неско партн по пр обще возмо не бу образ отдел получ прогр	В Караганды и принимаю участие в исследовании по поиску мест, где требуется осуществлять программы здравоохранения. Целью нашего исследования является определение мест, где люди могут найти новых сексуальных партнеров, а также мест, где можно встретить потребителей инъекционных наркотиков. СПИД может стать большой проблемой, если люди не будут знать, как уменьшить риск инфицирования. Я хотел (а) бы задать Вам несколько вопросов. Пожалуйста, назовите и укажите адреса мест, где люди встречают новых половых партнеров, и где мы можем найти потребителей инъекционных наркотиков для осуществления программ по профилактике СПИДа. Нам не нужна информация о частных жилищах. Мы интересуемся только общественно доступными местами. После того, как Вы назовете эти места, мы посетим их и узнаем о возможности осуществления профилактических программ. На ответы Вы потратите от 5 до 15 минут. Мы не будем спрашивать Вашего имени. Мы не будем Вас беспокоить в будущем. Ваши ответы никоим образом на Вас не отразятся. Ваше участие полностью добровольно. Вы можете отказаться отвечать на отдельные вопросы и от интервью в целом. Некоторые вопросы могут Вас смутить. Возможно, Вы не получите прямую выгоду от исследования, но через несколько месяцев в Караганды начнется новая программа в сфере здравоохранения.  Если у Вас возникли какие-либо вопросы, Вы сможете связаться с Пурясевой Татьяной Михайловной по				
	•	ноо вопросы, ды сможете связ ветственной за проведение исс	• •	ой Михаиловной по	
K7	· · · · · · · · · · · · · · · · · · ·	отвечать на вопросы?		ДА 1	
IXI	*ЕСЛИ НЕТ, Г	РЕКРАТИТЕ ИНТЕРВЬЮ.		HET 2	
K8	Сколько Ва	и лет?	T		
		ИНТЕРВЬЮ, ЕСЛИ	1041	ный возраст	
	РЕСПОНДЕН	Г МЛАДШЕ 18 ЛЕТ			
K9	партерами. Эт доступности п В каки с новь В каки услуги В каки новых В каки этого р для по К9А. Знаете л Да	узнать места, посещаемые лю, то поможет в планировании про резервативов. Конкретно, мы бих местах проводит время молодими половыми партнерами? х местах можно встретить женц за вознаграждение? е места ходят одинокие мужчин половых партнеров? х местах люди встречают новых района? В какие места Вашего риска новых половых партнеров и Вы такие места?  ———————————————————————————————————	грамм по профилактике Сы хотели знать: цежь, где молодые люди м цин или мужчин, предлага ы, приезжие, сезонные ра к половых партнеров в Ва района могут прийти люди	ПИДа и увеличении могут познакомиться ющих сексуальные абочие для поиска шем районе и вне и из других районов ца, (Б) более 10 минут	
K10		те о проблеме наркотиков в Вац			
1110		те о проолеме наркотиков в вас бление инъекционных наркотико	·	ДА 1 HET 2	
K11	За последние шприцы в Вац	4 недели видели ли Вы выброц зем районе?	ленные использованные	ДА 1 НЕТ 2	

Nº	Вопросы		Ка	атегории кодирован	ния		
K12		х поблизости отсюда можно найти использова ИАЗВАНИЕ КАЖДОГО МЕСТА НА СТР 4. ПОСЈ					
	ВОПРОСНИК	ВОПРОСНИКА ЗАПОЛНИТЕ БЛАНК МЕСТА ДЛЯ КАЖДОГО УПОМЯНУТОГО МЕСТА.					
К13	наркотиков?	В каких местах поблизости отсюда можно встретить потребителей инъекционных наркотиков?  ЗАПИШИТЕ НАЗВАНИЕ КАЖДОГО МЕСТА НА СТР 4. ПОСЛЕ ЗАВЕРШЕНИЯ ЭТОГО					
	ВОПРОСНИК	ВОПРОСНИКА ЗАПОЛНИТЕ БЛАНК МЕСТА ДЛЯ КАЖДОГО УПОМЯНУТОГО МЕСТА.					
K14		Поблизости отсюда знакомятся ли со своими клиентами женщины, оказывающие сексуальные услуги?			1		
K15	В каких места	х можно найти женщин, оказывающих сексуал	ьные услугі	1?			
		Е НАЗВАНИЕ КАЖДОГО МЕСТА НА СТ ВИЯ ЭТОГО ВОПРОСНИКА ЗАПОЛНИТ					
	КАЖДОГО	УПОМЯНУТОГО МЕСТА					
К16		Количество мест, указанных ключевым информантом в 10 минутах ходьбы отсюда					
		ест, указанных ключевым информантом					
	более 10 мин	ут ходьбы отсюда		<del></del>			

ПРЕДВАРИТЕЛЬНЫЙ СПИСОК СООБЩЕННЫХ МЕСТ. ИСПОЛЬЗУЯ ЭТОТ СПИСОК, СПРОСИТЕ РЕСПОНДЕНТА

Из всех упомянутых Вами мест, назовите, пожалуйста, одно, где больше людей встречают новых половых партнеров?

Из всех упомянутых Вами мест, назовите, пожалуйста, одно, где можно встретить больше потребителей инъекционных наркотиков или использованные шприцы?

Из всех упомянутых Вами мест, назовите, пожалуйста, одно, где можно встретить больше женщины, оказывающих сексуальные услуги?

ПОСЛЕ ТОГО, КАК ВЫ ОПРЕДИЛИЛИ МЕСТА, ЗАПОЛНИТЕ БЛАНК МЕСТА ДЛЯ КАЖДОГО МЕСТА, УАЗАННОГО В СПИСКЕ

1	В 10 минутах ходьбы отсюда 1	Более 10 минут ходьбы отсюда 2
2	1	2
3	. 1	2
4	. 1	2
5	. 1	2
6	. 1	2
7	. 1	2
8	_ 1	2
9	_ 1	2
10	_ 1	2

# БЛАНК ОТКАЗА КЛЮЧЕВОГО ИНФОРМАНТА 2003 г

Nº	Вопросы	Кате	гории кодирования
144			Алматы 1
K1	Город		Караганды 2
			Ташкент 3
			Ош 4
	Место проведения		
K2	интервью	`	Участок в городе
K3	Номер интервьюера		
K4	Дата (день, месяц, год)		
K5	Пол ключевого информанта	a	МУЖСКОЙ 1 ЖЕНСКИЙ 2
K6	Тип ключевого информанта	]:	ВВЕДИТЕ КОД:
	водитель с	ДИТЕЛЬ ТАКСИ 1 ОБЩЕСТВЕННОГО ТРАНСПОРТА 2 АЛЬНОБОЙЩИК 3 РЧЕСКОГО СЕКСА (РКС) 4 КЛИЕНТ РКС 5 СУТЕНЕР 6	БАРМЕН/ОФИЦИАНТ 16 РАБОТНИК ГОСТИНИЦЫ 17 РАБОТНИК БАНИ/САУНЫ 18 БОМЖ 19 БЕЗРАБОТНЫЙ 20 ИНОГОРОДНИЙ (-ЯЯ) 21 ДВОРНИК 22 УБОРЩИК (-ЦА)
	РАБОТНИК НПО / РАБОТНИ НАРКОДИСП ВЕНЕРОЛОГИЧЕСКОГО РАБОТНИК СКО МИЛИЦИОНЕР / ПО РАБОТНИК ЗДР/ ПРОДАВЕЦ ЛАРЬКА ТОРГОВЕЦ / РАБОТНИ	РОЙ ПОМОЩИ 10 ОЛИЦЕЙСКИЙ 11 АВООХРАНЕНИЯ / АПТЕК 12 А / МАГАЗИНА 13	ПОДЪЕЗДОВ 23 РАБОТНИК КСК 24 МОЛОДЕЖЬ 25 ЖИТЕЛЬ ОБЩЕЖИТИЯ 26 ЖИТЕЛЬ РАЙОНА 27 НЕ ОПРЕДЕЛЕН ТИП ИНФОРМАНТА 30  ДРУГОЕ50

### БЛАНК МЕСТА 2003 г

S1	Город				Алматы	1
31	Тород			К	Сараганды	2
					Ташкент	. 3
					Ош	4
60	Magaza					
S2	Место проведения интервь	ю		Номер участка _		
62	Herron Windows (Herro					=
S3	Номер интервьюера / Номе	р ключевого		/		
	информанта					
S4	Номер места в анкете					
S5	Название места					
				в 10 минутах ходьб	бы отсюда	1
S6	Названо как приоритет	ное место	б	олее 10 минут ходьб		
S7				отность шти ут жод в	э. отогода	
31	Адрес этого места и как его	наити				
S8	Где расположено это м	MACTO		Номер участка _		
		il CCTO				
S9	ТИП МЕСТА:			*ВВЕДИТЕ КОД	ባ :	
	01 БАР / КАФЕ / РЕСТО	ЭРАН	15 ТЕРРИТ	ОРИЯ ШКОЛЫ		
	02 НОЧНОЙ КЛУБ / ДИСКО	-		ОРИЯ КОЛЛЕДЖА /		
	03 КАЗИНО			ИОНАЛЬНОЙ ШКОЛІ	Ы	
	04 ГЕЙ КЛУБ		17 ТЕРРИТ	ОРИЯ ВУЗА		
	05 ГОСТИНИЦА		10 WEDEOL		ω л п	
	06 БАНЯ / САУНА	· –	19 ABTOBO	НОДОРОЖНЫЙ ВОК Экзап	3AJI	
	07 БИЛЬЯРДНЫЙ ЗАЛ/КЛУ 08 ИГРОВОЙ ЗАЛ	D	20 АЭРОП			
	00 ИГРОВОЙ ЗАЛ 09 КОМПЬЮТЕРНЫЙ КЛУЕ	ξ		КА ГРУЗОВИКОВ		
		•	22 СТОЯН			
	10 ОБЩЕЖИТИЕ		23 УЛИЦА			
	11 ЧАСТНАЯ КВАРТИРА/Д	ОМ	24 ПОДЗЕМ	ИНЫЙ ПЕРЕХОД		
	12 ПОДВАЛ / ЧЕРДАК		25 РЫНОК			
	13 ЛЕСТНИЧНАЯ ПЛОЩАД			CKBEP		
	14 НЕИСПОЛЬЗУЕМОЕ / Б	РОШЕННОЕ ЗДА	НИЕ 27 ДРУГОЕ	<u>:</u>		
S10			27 ДГУГОС	·	FO 11	
310	В этом месте		Ј Люди встречают новых			ет
		Можно н	йти потребителей инъекц Можно найти испол	ционных наркотиков	1 2	
		Можно встрети	ь женщин, оказывающих	•	1 2	
		-			1 2	
					1 2	

# ФОРМА ОЦЕНКИ МЕСТА 2003 г

				Номер	
Nº	Вопросы	Категории к	одирован	RNI-	
V1	Город			АЛМАТ	
				КАРАГАНД	•
				ТАШКЕН О	НТ 3 Ш 4
V2	Расположение места			Код участка	
V3	Идентификационный ном списке	ер места в			
V3.1	Сколько ключевых информазвали это место?	омантов			
V4	Название места				
V5					
۷3	Точный адрес				
V6	Находится ли это место н минут ходьбы от	не более 10		Да	Нет
	ПРОЧИТАЙТЕ СПИСОК			Загруженной транспортом дороги 1	2 2
	ОБВЕДИТЕ ОДИН КОД Д КАЖДОГО ВАРИАНТА	µя		Остановки общественного транспорта 1 Стоянки грузового транспорта 1 Станции метро 1	2 2
V7	ТИП МЕСТА: 01 БАР / КАФЕ / РЕСТОР 02 НОЧНОЙ КЛУБ / ДИСІ 03 КАЗИНО 04 ГЕЙ КЛУБ 05 ГОСТИНИЦА 06 БАНЯ / САУНА 07 БИЛЬЯРДНЫЙ ЗАЛ/КІ 08 ИГРОВОЙ ЗАЛ 09 КОМПЬЮТЕРНЫЙ КЛ 10 ОБЩЕЖИТИЕ 11 ЧАСТНАЯ КВАРТИРА 12 ПОДВАЛ / ЧЕРДАК	КОТЕКА ПУБ УБ		*ВВЕДИТЕ КОД: 15 ТЕРРИТОРИЯ ШКОЛЫ 16 ТЕРРИТОРИЯ КОЛЛЕДЖА / ПРОФЕССИОНАЛЬНОЙ ШКОЛЫ 17 ТЕРРИТОРИЯ ВУЗА 18 ЖЕЛЕЗНОДОРОЖНЫЙ ВОКЗАЛ 19 АВТОВОКЗАЛ 20 АЭРОПОРТ 21 СТОЯНКА ГРУЗОВИКОВ 22 СТОЯНКА ТАКСИ 23 УЛИЦА 24 ПОДЗЕМНЫЙ ПЕРЕХОД 25 РЫНОК	
	13 ЛЕСТНИЧНАЯ ПЛОЩ. 14 НЕИСПОЛЬЗУЕМОЕ			26 ПАРК / СКВЕР 27 ДРУГОЕ	
V9	Номер интервьюера	D. GELLINOE	OF41 11 18 1E		
V10	Дата (ДЕНЬ/МЕСЯЦ)				
V 10	дата (детто/мес/пд)				

Nº	Вопросы Категории кодирова		зания
V11	День недели		ПОНЕДЕЛЬНИК 1 ВТОРНИК 2 СРЕДА 3 ЧЕТВЕРГ 4 ПЯТНИЦА 5 СУББОТА 6 ВОСКРЕСЕНЬЕ 7
V12	Время начала интервью		::
V13	(ПО 24-ЧАСОВОЙ СИСТІ Количество людей наход момент прибытия. <u>Интервьюер</u> : нужно посчі момент Вашего прибытия	ящихся на месте на итать количество на	МУЖЧИН: ЖЕНЩИН:
V13	Количество использован обнаруженных интервью		ЖЕПЩИП. <u> </u>
V14	Пол респондента		МУЖСКОЙ 1 ЖЕНСКИЙ 2
необхо вопрос спраш добров Вы буд исслед Данно месте хотели Ниже г есть во	одимо осуществлять прогр сов об этом месте и о людя ивать Вашего имени или л вольным, и Вы можете не о дете смущены некоторыми дования, но данная Вами и е исследование проводито будет анализироваться то и бы быть уверенными в то приведены имя и контактны	аммы по здравоохране ях сюда приходящих. И юбую другую информа отвечать на отдельные вопросами. Может бы информация поможет в я во многих местах нац лько в обобщенном вид м, что Вам больше 17 и ый телефон человека, с иться к Пурясевой Татья	ы собираем информацию о том, где в городе нию. Поэтому я хочу задать Вам несколько нтервью займет у Вас от 15 до 30 минут. Я не буду дию на Вас указывающую. Ваше участие является вопросы или отказаться от интервью. Возможно, ь Вы не получите прямой выгоды от настоящего планировании программ по здравоохранению. него города. Вся полученная информация об этом е вместе с информацией из других мест. Мы нет.
V15	Вы согласны участво	вать?	ДА 1 НЕТ 2
V16			Точный возраст
V17	Сколько лет прошло с те: местом для проведения в	х пор, как оно стало	Менее одного года 0 От 1 до 2 лет 1 От 3 до 5 лет 2 От 6 до 10 лет 3 Более 10 лет 4 Не применимо 9

Nº	Вопросы	Категор	ии кодир	ования						
V18							ДА	HET	3/0	C
	Чем здесь занимаю	тся	Пьют г			от пиво	1	2	8	
	люди?		Пьют крепкие алкогольные напі			-	1	2	8	
			Смотрят телевизор и ви				1	2	8	
	ПРОЧИТАЙТЕ СПИ	СОК				анцуют	1	2	8	
	ОБВЕДИТЕ ОДИН Н	ОД ДЛЯ			Слушают	музыку	1	2	8	
	КАЖДОГО ВИДА			Игры (ком	пьютерные, авт	оматы)	1	2	8	
	ДЕЯТЕЛЬНОСТИ					Едят	1	2	8	
					Смотрят стрипт		1	2	8	
V19	Мне сказали, что люди с половыми партнерами					да		нет	3/0	
	подобных этому. Дейст		Мужчины	встречают	здесь новых	1		2	8	
	ли	on regione			ров – женщин?					
	ЗАЧИТАЙТЕ СПИСОК				т здесь новых	1		2	8	
				ных партне						
				•	здесь новых	1		2	8	
					ров – мужчин?			_		
				г ли кто-ниб накомиться?		1		2	8	
					: ди встречают					
				вых сексуал		1		2	8	
			партнеро		1511517					
V20						· ·	·	".	_	
V20	Знакомятся ли здесь же							Да	1	
	оказывающие сексуалы	CO					F	<del>І</del> ет	2	
	своими клиентами?									_
							ŀ	Не зна	ЭЮ	8
V21								ного го		0
'-'	Если ДА,							до 2 ле		1
	Сколько лет прошло с т	ого времени	і, как в			,		до 5 ле		2
	этом месте женщины, о	•	e			(		о 10 ле		ა 4
	сексуальные услуги, на	нали искать					Более 10 лет Не знаю			8
	клиентов?							110 011	<u> </u>	_
ПРОЧІ	ИТАЙТЕ: Давайте погово									
	На ваш взгляд, среди <u>м</u>			да в	Никто	<u>Некот</u>	<u>0</u>	<u>Больц</u>		
V22	"часы пик", какую часть	составляют				<u>рые</u>	+	<u>о/ Поч</u>	_	<u>੪</u>
V22	(а) Безработные				0	<u> </u>	-		<u>2</u> 2	
	(b) Студенты (c) Младше 18 лет				0	1 1	+		<u>2</u> 2	
	(d) Живут в 10 минутах	N MOULIIO VO	ULPER OTOR	ла	0	1	+		<u>2</u> 2	
	(е) Жители другого рай		двові ОТСК	да	0	1	+		<u>2</u> 2	
	(f) Приезжают сюда на г		такси		0	1	1 2			
	. ,			орте	0	1			<u>2</u> 2	
	(g) Приезжают сюда на общественном (h) Приходят сюда хотя бы раз в недел			-7.0	0	1	<del>-  </del>		<u>-</u> 2	
	(і) Пьют здесь алкогольные напитки				0	<u>·</u> 1	+		<u>-</u> 2	
	(ј) Находят здесь новых				0	1	+		<u>=</u> 2	
	(k) Вероятно являются л			ими	0	4				
	инъекционные наркотик	-	· '		0	1			2	
	(I) Вероятно являются и			ями)	0	1			2	
	(m) Вероятно являются		кенщин,		0	1		2	2	
	предлагающих секс за д	ценьги								

Nº	Вопросы	Категории кодирова	ния					
	1	н <u>шин,</u> приходящих сюда в		Никто	Некс	то	Больш	инство
	пик", какую часть составл		ры			и все		
V24	(а) Безработные			0	1			2
	(b) Студенты			0	1			2
	(с) Младше 18 лет			0	1			2
	(d) Живут в 10 минутах хо	одьбы отсюда		0	1			2
	(е) Жители другого район	ıa		0	1			2
	(f) Приезжают сюда на ма	ашине или такси		0	1			2
	(g) Приезжают сюда на о	бщественном транспорте		0	1			2
	(h) Приходят сюда хотя б	ы раз в неделю		0	1			2
	(і) Пьют здесь алкогольны			0	1			2
	(ј) Находят здесь новых г			0	1			2
	(k) Вероятно являются ли инъекционные наркотики	· ·		0	1			2
	(I) Вероятно являются же за деньги	нщинами предлагающие	секс	0	1			2
V25	Укажите, пожалуйст	а, "часы пик" типичные		Утро	День	Веч		Ночь
V 23	для данного места з	за последние два		6-11	11-17	17-2		22-6
	месяца?		ПН	1	2	3		4
	СПРОСИТЕ О ЛНЯ	Х И ВРЕМЕНИ СУТОК И	BT	1	2	3		4
	ОТМЕТЬТЕ НУЖНЬ		CP	1 1	2	3		4
	МОЖНО ОТМЕТИТ	HECKOLLIKO	ЧT	1 1	2	3		4
	OTBETOB	В ПЕСКОЛЬКО	ПТ	1	2	3		4
	OTBETOB		СБ	1 1	2	3		4
			BC	1 1	2	3		4
V26	Назовите, пожалуйста, приблизительное			11-25			251-	
	количество людей (мужчин и женщин),			26-50 3 301-330				
	посещающих данно	е место в часы пик.		51-100			351-	
	ПРИ НЕОБХОДИМО	ОСТИ. ЗАЧИТАЙТЕ		101-150			401-	
	ВАРИАНТЫ	, -		151-200			451-	
				201-250	7		> ;	500 13
V27	I	га, приблизительное						
V Z I		и женщин, посещающих				Мужч		
\ (OO	данное место в час	ы ПИК.				Женц		- 11
V28	Укажите наиболее г	осещаемые периоды?				OLANA		a He
						3MM BECH		_
						ЛЕТ		2
						OCEH		
						ДНИКИ		
1/00	Продолжения							ДА 1
V29	Проводилась ли зде							HET 2
	мероприятия/деист	вия по профилактике	Если д	да, то какие?				
	БИЭ/СПИД!						1/семин	
					Б	рошюр	ы/лист	
				5				каты 3
				Разда	ча однора			
				Друго		ча през	зервати	1вов 5
V30	Были ли элесь лост	упны презервативы в						ГДА 1
V 30	течение последних							РГДА 2
	точение последних	12 MCOALCD:					НИКС	
							HE 3	3 GAH

Nº	Вопросы	Категории кодиров	зания
V31.1		ь сегодня в наличии ы? Если ДА, могу ли я их	ДА, НО ВЫ НЕ МОЖЕТЕ ИХ УВИДЕТЬ 1
	увидеть?	Si. Losin Art, mory sin si vix	ДА, ПРЕЗЕРВАТИВЫ ПОКАЗАНЫ 2
V31.2		цее количество	HET 3
	марок/произв	водителей?	КОЛИЧЕСТВО МАРОК/ПРОИЗВОДИТЕЛЕЙ
V31.3	Населите ма	DIZIA OTIAN EROCOORDOTIADOR?	ПРЕЗЕРВАТИВОВ:
	пазовите мар	рки этих презервативов?	Назовите марки этих презервативов:
V32		чью найти /купить ы недалеко от этого места (не	ДА 1
		ы недалеко от этого места (не нут ходьбы отсюда)?	HEI Z
			HE 3HAO 8
V34	Вы бы хотелі презерватив	и, чтобы здесь продавались ы?	ДА 1
	просорватив	SI .	HET 2
	<u> </u>		НЕ ПРИМЕНИМО 9
V35		ете о проблеме наркомании в ? Насколько распространено	ОЧЕНЬ РАСПРОСТРАНЕНО 1
		е наркотиков в этом районе?	ОТНОСИТЕЛЬНО РАСПРОСТРАНЕНО 2
			НЕ ОЧЕНЬ РАСПРОСТРАНЕНО 3
V36	Видели ли В	ы использованные иглы или	ВООБЩЕ НЕТ В ЭТОМ РАЙОНЕ 4 Да 1
V 36	шприцы внут последние 3	ри или около этого места за месяца?	Нет 2
V37		ли в этом месте люди,	Да 1
	употребляюц	цие инъекционные наркотики?	Нет 2
V38		мени прошло с тех пор, как в пожно встретить людей,	Менее одного года 0
		цих инъекционные наркотики	От 1 до 2 лет 1
	СПАСИБО 3/	А ПОМОЩЬ, ДО СВИДАНИЯ!	От 3 до 5 лет 2
			От 6 до 10 лет 3
			Более 10 лет 4
			Не знаю 8
V39		: Признаки деятельности по се СПИДа, замеченные ом на месте	КОЛ-ВО ИМЕЮЩИХСЯ ПЛАКАТОВ (СПИД)
			КОЛ-ВО БРОШЮР НА УЧАСТКЕ (СПИД)
			КОЛИЧЕСТВО ПРЕЗЕРВАТИВОВ, КОТОРОЕ
			МОЖНО УВИДЕТЬ

Нумерацию в анкете обязательно потом посмотри!!!!!!!!!!!!!

### БЛАНК ОТКАЗА ПО ФОРМЕ ОЦЕНКИ МЕСТА 2003 Г

Номер \_

Nº	Вопросы	Категор	ии кодир	ования
B1	•			АЛМАТЫ 1
	Город			КАРАГАНДЫ 2
				Ташкент 3
				Ош 4
B2	Расположение места			Код участка
В3	Идентификационный списке	номер мес	та в	
B4	Сколько ключевых ин это место?	формантов	з назвали	
B5	Название места			
B6	Точный адрес			
B7	Результат проверки места			МЕСТО НЕ НАЙДЕНО/НЕПРАВИЛЬНЫЙ АДРЕС 1 МЕСТО НАЙДЕНО, НО В ИНТЕРВЬЮ ОТКАЗАНО 2 МЕСТО ВРЕМЕННО ЗАКРЫТО 3 МЕСТО ЗАКРЫТО ПОСТОЯННО/ ИЛИ БОЛЬШЕ НЕ СУЩЕСТВУЕТ 4 МЕСТО УЖЕ НАЗЫВАЛОСЬ/ДУБЛИРУЕТСЯ 5
B8	ТИП МЕСТА:  01 БАР / КАФЕ / РЕСТОРАН 02 НОЧНОЙ КЛУБ / ДИСКОТЕКА 03 КАЗИНО 04 ГЕЙ КЛУБ 05 ГОСТИНИЦА 06 БАНЯ / САУНА 07 БИЛЬЯРДНЫЙ ЗАЛ/КЛУБ 08 ИГРОВОЙ ЗАЛ 09 КОМПЬЮТЕРНЫЙ КЛУБ 10 ОБЩЕЖИТИЕ 11 ЧАСТНАЯ КВАРТИРА/ДОМ 12 ПОДВАЛ / ЧЕРДАК 13 ЛЕСТНИЧНАЯ ПЛОЩАДКА / ПОДЪЕЗД ДОМА 14 НЕИСПОЛЬЗУЕМОЕ / БРОШЕННОЕ ЗДАНИЕ		подъезд	*ВВЕДИТЕ КОД:
B9				
D40	Номер интервьюера			I
B10	I Дата (ДЕНЬ/МЕСЯЦ)			

### ИНДИВИДУАЛЬНАЯ АНКЕТА 2003 г

#### Q1. Название города:

- 1. Алматы
- 2. Караганды
- 3. Ташкент
- 4. Ош

Q2. I	Пол	инте	рвьюе	ра и	номе	מ
-------	-----	------	-------	------	------	---

		-	-	•
1. Муж	кской	2. Женск	ий	Индивидуальный номер интервьюера
Q3. Пос	ледов	зательны	ій номер ин	дивидуального интервью на месте:
Q4. Наз	вание	и иденти	ификационн	ный номер места:
Q4.1. Pa	спол	ожение м	еста. Код у	частка:
Q5. Дата	а (Ден	ıь/Месяц/	Год)	
Q6. Bpe	мя су	ток: (24-ч	асовая сисп	пема) : :
<u>Интерв</u>	<u>ьюер</u> :	необходи	імо заполниі	ть перед каждым интервью.
Q7. Кол	ичест	во людей	й находящи	хся на месте во время интервью:
Интерв	<u>ьюер</u> :	необходи	імо заполниі	ть перед каждым интервью.
МУЖЧИ	H:		ЖЕНЩИН:	<del></del>

### **Q8**. Пол респондента:

- 1. МУЖСКОЙ
- 2. ЖЕНСКИЙ
- Q9. Мнение интервьюера, является ли респондент наркозависимым или предоставляет сексуальные услуги за деньги:
- 1. ТОЛЬКО НАРКОЗАВИСИМЫЙ (-АЯ)
- 2. ТОЛЬКО ПРЕДОСТ. СЕКС. УСЛУГИ
- 3. И ТО И ДРУГОЕ
- 4. НИ ТО И НИ ДРУГОЕ

Здравствуйте. Я работаю в	профилактические программы по ВИЧ/СПИДу и ать Вам несколько вопросов относительно вашего сексуальном поведении. Интервью продлится от 20 и. Мы не будем Вас беспокоить в будущем. Ваши ше участие полностью добровольно. Вы можете нтервью в целом. Некоторые вопросы могут Вас
Вся полученная информация будет анализироваться многих людей, которых мы опрашиваем. Если связаться с Пурясевой Татьяной Михайловной по тел исследования.	у Вас возникли какие-либо вопросы, Вы сможете
Q10.Вы согласны участвовать? <u>Интервью</u>	<u>ер</u> : если нет, то прекратите интервью
1. ДА 2. HET	
Q11. Сколько вам лет?	
<u>—— —— —— —— Интервьюер</u> : если респондент младше 18 лет, то прекр	атите интервью
5. <b>Q12.Вы живете в Караганды?</b> 1. ДА	
2. HET <b>→</b> переход к вопросу Q12.2	
Q12.1. Если ДА, то в каком микрорайоне или части г	орода Вы проживаете?
Микрорайон или перекрестки улиц	Код участка
<b>Q12.2. Если за пределами Караганды, то где?</b> 1. КАРАГАНДИНСКАЯ ОБЛАСТЬ	
2. ДРУГАЯ ОБЛАСТЬ КАЗАХСТАНА	
3. ДРУГАЯ СТРАНА СРЕДНЕЙ АЗИИ	
4. ДРУГАЯ СТРАНА	
Q12.3. Как далеко Вы живете от данного места (места. 10 минут ходьбы и меньше. 2. Более 10 минут ходьбы	га опроса)? Расстояние:
Q13.Как долго Вы здесь /там/ живете?	
КОЛИЧЕСТВО ЛЕТ	
МЕНЕЕ ОДНОГО ГОДА 0	
ВСЮ ЖИЗНЬ 97	
Q14.Сколько ночей Вы провели за пределами город	ца за последние три месяца?
КОЛИЧЕСТВО НОЧЕЙ:	

#### **Q15.Как часто Вы приходите в это место?** <u>Интервьюер:</u> ТОЛЬКО ОДИН ОТВЕТ

- 1. КАЖДЫЙ ДЕНЬ
- 2. 4-6 РАЗ В НЕДЕЛЮ
- 3. 2-3 РАЗА В НЕДЕЛЮ
- 4. ОДИН РАЗ В НЕДЕЛЮ
- 5. 2-3 РАЗА В МЕСЯЦ
- 6. ОДИН РАЗ В МЕСЯЦ
- 7. МЕНЕЕ ОДНОГО РАЗА В МЕСЯЦ
- 8. ЭТО МОЙ ПЕРВЫЙ ВИЗИТ

Q16.Сколько раз за последние 7 суток, включая сегодня,	Вы посещали это место?
--	------------------------

#### Q17.Когда Вы пришли сюда впервые?

- 1. ЭТО МОЙ ПЕРВЫЙ ВИЗИТ
- 2. НЕ БОЛЕЕ 4 НЕДЕЛЬ НАЗАД
- 3. НЕ БОЛЕЕ 2-6 МЕСЯЦЕВ НАЗАД
- 4. НЕ БОЛЕЕ 7-12 МЕСЯЦЕВ НАЗАД
- 5. БОЛЕЕ ГОДА НАЗАД

#### **Q18.Как Вы добрались до этого места сегодня?** Интервьюер: ТОЛЬКО ОДИН ОТВЕТ

- 1. Пешком
- 2. На машине
- 3. На общественном транспорте

Q19.Некоторые люди встречают новых сексуальных партнеров в местах подобных этому. Как Вы считаете, встречают ли люди здесь новых сексуальных партнеров, то есть людей, с которыми они еще никогда не занимались сексом?

- 1. ДА
- 2. HET

**Q20.Какая цель Вашего прихода в данное место?** Интервьюер: ПРОЧИТАЙТЕ СПИСОК.И

#### ОБВЕДИТЕ ОДИН КОД ДЛЯ КАЖДОГО ВАРИАНТА

	Да	Нет
Употребление алкогольных напитков	1	2
Встреча/поиск нового полового партнера	1	2
Встреча/общение с друзьями	1	2

Q21.Вы когда-нибудь знакомились здесь с человеком, который стал Вашим новым сексуальным партнером?

- 1. ДА
- 2. HET → переход к вопросу Q24

Q22.Когда Вы в последний раз познакомились здесь с новым сексуальным партнером?

- 1. НЕ БОЛЕЕ 24 ЧАСОВ НАЗАД
- 2. НЕ БОЛЕЕ 7 ДНЕЙ НАЗАД
- 3. НЕ БОЛЕЕ 2-4 НЕДЕЛЬ НАЗАД
- 4. НЕ БОЛЕЕ 2-3 МЕСЯЦЕВ НАЗАД
- 5. НЕ БОЛЕЕ 4-6 МЕСЯЦЕВ НАЗАД
- 6. НЕ БОЛЕЕ 7-12 МЕСЯЦЕВ НАЗАД
- 7. БОЛЕЕ ГОДА НАЗАД

Q23.Когда Вы в последний раз занимались сексом с <u>этим новым</u> партнером, пользовались ли Вы презервативом?

- 1. ДА
- 2. HET
- 3. НЕ ПОМНЮ

Q24.Сейчас я бы хотел спросить Вас о людях, с которыми Вы вступали в половые отношения за последние 4 недели. Вспомните, со сколькими разными людьми Вы занимались сексом за последние 4 недели?

Q25.Сколько из этих людей являлись новыми половыми партнерами за последние 4 недели?

КОЛИЧЕСТВО НОВЫХ ПАРТНЕРОВ ЗА ПОСЛЕДНИЕ 4 НЕДЕЛИ \_\_\_\_\_

НЕ БЫЛО НОВЫХ ПОЛОВЫХ ПАРТНЕРОВ 0

Q26.В последний раз, когда Вы занимались сексом с одним из этих <u>новых</u> партнеров, Вы пользовались презервативом?

- 1. ДА  $\rightarrow$  переход к вопросу Q28
- 2. HET

НЕ БЫЛО НОВЫХ ПАРТНЕРОВ ЗА ПОСЛЕДНИЕ 4 НЕДЕЛИ 9 → переход к вопросу Q29

Q27.Если Нет, то почему Вы не использовали презерватив со своим новым последним половым партнером?

Интервьюер: не зачитывать список предлагаемых ответов. Возможно несколько вариантов ответов.

- 1. Партнер был против.
- 2. Я не люблю использовать презервативы
- 3. Я доверяю своему партнеру
- 4. Я боюсь подозрений со стороны партнера
- 5. Использую другие контрацептивы
- 6. Презервативы очень дорогие

MEASURE Evaluation 212 7. Не имел(а) при себе презерватива 8. Презервативы не защищают от инфекций передающихся половым путем /СПИДа 9. Низкое качество презервативов/презервативы рвутся Q28.Как часто Вы использовали презервативы со своими новыми половыми партнерами за последние 4 недели? 1. Всегда 2. Иногда 3. Никогда Q29.Примерно сколько новых половых партнеров у Вас было в течение последних 12 месяцев? КОЛИЧЕСТВО \_\_\_\_\_\_ НЕ БЫЛО НОВЫХ ПОЛОВЫХ ПАРТНЕРОВ 0 Q30.У Вас есть постоянный половой партнер(ы), то есть тот (те), с которым Вы вступали в половые отношения как минимум ежемесячно в течение последнего года, или более? Это может быть супруг(а), любовник(ца) или кто-то еще. 1. ДА, У МЕНЯ ЕСТЬ РЕГУЛЯРНЫЙ(Е) ПАРТНЕР(Ы) 2. НЕТ РЕГУЛЯРНОГО ПАРТНЕРА → переход к вопросу Q32 Q31.Использовали ли Вы презерватив при последнем половом акте с Вашим постоянным половым партнером? 1. ДА 2. HET Q32.3а последние 12 месяцев рвался ли у Вас презерватив? 1. ДА 2. HET 3. Не использую презервативы 4. Не было половых партнеров в течение последних 12 месяцев. Q33.Сколько у Вас было половых партнеров, включая регулярных, новых и других партнеров в течение последних 12 месяцев? КОЛИЧЕСТВО НЕ БЫЛО ПОЛОВЫХ ПАРТНЕРОВ 0 Q34.Из них назовите, пожалуйста, самый молодой возраст и самый старший возраст? Интервьюер: если был только один половой партнер, то нужно поставить возраст в двух позициях, если вообще не было партнеров, то поставить код 97 в двух позициях. Молодой возраст: \_\_\_\_ \_\_\_ Старший возраст: \_\_\_\_ \_\_\_

Q35.Когда вы пользовались презервативом в последний раз?

- 1. НЕ БОЛЕЕ 24 ЧАСОВ НАЗАД
- 2. НЕ БОЛЕЕ НЕДЕЛИ НЕЗАД
- 3. НЕ БОЛЕЕ 4 НЕДЕЛЬ НАЗАД

- 4. НЕ БОЛЕЕ 2-6 МЕСЯЦЕВ НАЗАД
- 5. НЕ БОЛЕЕ 7-12 МЕСЯЦЕВ НАЗАД
- 6. БОЛЕЕ ГОДА НАЗАД
- 7. НИКОГДА НЕ ПОЛЬЗОВАЛСЯ(ЛАСЬ) ПРЕЗЕРВАТИВОМ  $\rightarrow$  переход к вопросу Q38

#### Q36.Где Вы взяли презерватив, который использовали в последний раз?

- 1. В МАГАЗИНЕ
- 2. В АПТЕКЕ
- 3. В КИОСКЕ
- 4. ПРЕЗЕРВАТИВ БЫЛ У ПАРТНЕРА
- 5. У ДРУГА
- 6. ПОЛУЧИЛ БЕСПЛАТНО
- 7. В Баре/ночном клубе/ресторане/гостинице
- 8. ДРУГОЕ

## **Q37.Какой марки был презерватив, который Вы использовали последний раз?** Интервьюер: Только один ответ.

- 1. Favorite
- 2. Durex
- 3. Pilotos
- 4. Two to Tango
- 5. Innotex
- 6. Vizit
- 7. Lifestyle
- 8. Context
- 9. Desire
- 10. Gold Circle
- 11. Индийские
- 12. Другие\_
- 13. Не знаю/не помню

#### Q38. У Вас есть с собой презерватив?

- 1. ПРЕЗЕРВАТИВ ЕСТЬ, НО Я ЕГО НЕ ПОКАЖУ  $\rightarrow$  переход к вопросу Q39
- 2. ДА, И ПРЕЗЕРВАТИВ ПОКАЗАН
- 3. ПРЕЗЕРВАТИВА С СОБОЙ НЕТ  $\rightarrow$  переход к вопросу Q39

#### **Q38.1.ЕСЛИ ДА, Могу ли я посмотреть?** Если презерватив показан, то назовите его марку?

<u>Интервьюер</u>: Возможно, несколько вариантов ответов, если респондент показал презервативы разных марок

- 1. Favorite
- 2. Durex
- 3. Pilotos
- 4. Two to Tango

_		
<b>F</b>	Innotex	
:)		

- 6. Vizit
- 7. Lifestyle
- 8. Context
- 9. Desire
- 10. Gold Circle
- 11. Индийские
- 12. Другие

Q39.По Вашему мнению, какая цена презерватива является приемлемой? Укажите цену в тенге за один презерватив.

Цена	тенге

Q40. Слышали ли Вы или видели какую-либо информацию о ВИЧ/ СПИДе за последние 12 месяцев?

- 1. ДА
- 2. HET → переход к вопросу Q41

**Q40.1. Если ДА, то из каких источников Вы получали эту информацию?**<u>Интервьюер</u>: прочитайте список. ОБВЕДИТЕ ОДИН КОД ДЛЯ КАЖДОГО ВАРИАНТА

Нет Да 1 2 Телевидение 1 2 Радио Газеты/Журналы 1 2 2 1 Плакаты/Брошюры 1 2 От друзей или родственников 2 1 От врача/работника здравоохранения 1 2 В учебных заведениях 2 1 От аутрич работника Другое 1 2

#### Q41.Работаете ли Вы в настоящее время?

- 1. ДА, ПОЛНАЯ ЗАНЯТОСТЬ
- 2. ДА, СЛУЧАЙНАЯ РАБОТА / НЕПОЛНАЯ ЗАНЯТОСТЬ
- 3. НЕТ, И НЕ ИЩУ РАБОТУ
- 4. НЕТ, ИЩУ РАБОТУ

#### Q42.Учитесь ли Вы в настоящее время?

- 1. ДА
- 2. HET

**Q43.**Состоите ли Вы с кем-либо в браке (зарегистрированном или незарегистрированном)?

- ДА
- 2. HET

#### **Q44.Ваш уровень образования?**

- 1. НАЧАЛЬНОЕ (ДО 7 КЛАССОВ) ИЛИ НИКАКОГО
- 2. НЕЗАКОНЧЕННОЕ СРЕДНЕЕ (8-9 КЛАССОВ)
- 3. СРЕДНЕЕ
- 4. СРЕДНЕЕ СПЕЦИАЛЬНОЕ
- 5. НЕЗАКОНЧЕНООЕ ВЫСШЕЕ
- 6. ВЫСШЕЕ

Q45.Мы бы так же хотели знать о том, что Вы думаете о потреблении наркотиков в этом районе. По Вашему мнению, как сильно распространено потребление инъекционных наркотиков в этом районе? «РАЙОН» ОБОЗНАЧАЕТ УЧАСТОК, ГДЕ ПРОВОДИТСЯ ИНТЕРВЬЮ

- 1. ОЧЕНЬ РАСПРОСТРАНЕНО
- 2. ОТНОСИТЕЛЬНО РАСПРОСТРАНЕНО
- 3. НЕ ОЧЕНЬ РАСПРОСТРАНЕНО
- 4. НЕ РАСПРОСТРАНЕНО ВООБЩЕ
- 5. HE 3HAЮ

Q46.Как Вы считаете, приходят ли сюда люди, употребляющие инъекционные наркотики?

- 1. ДА
- 2. HET
- 3. НЕ ЗНАЮ

Q47.Знаете ли Вы что-нибудь о месте (местах) в Караганды, где потребители инъекционных наркотиков могут обменять использованные шприцы на новые?

- 1. ДА
- 2. HET

Q48.А теперь мы хотели бы задать Вам несколько вопросов о Вашем собственном опыте потребления инъекционных наркотиков. Ваши ответы будут сохранены в конфиденциальности. Вы когда-нибудь употребляли наркотики путем инъекций?

- 1. ДА
- 2. НИКОГДА НЕ УПОТРЕБЛЯЛ ИНЪЕКЦИОННЫЕ НАРКОТИКИ → переход к вопросу Q60
- OTKA3

**Q49.ЕСЛИ ДА: Когда Вы в последний раз употребляли наркотики путем инъекций?** 

- 1. НЕ БОЛЕЕ 7 ДНЕЙ НАЗАД
- 2. НЕ БОЛЕЕ 2-4 НЕДЕЛЬ НАЗАД
- 3. НЕ БОЛЕЕ 2-3 МЕСЯЦЕВ НАЗАД
- 4. НЕ БОЛЕЕ 4-6 МЕСЯЦЕВ НАЗАД
- 5. НЕ БОЛЕЕ 7-12 МЕСЯЦЕВ НАЗАД  $\rightarrow$  переход к вопросу Q60
- 6. БОЛЕЕ ГОДА НАЗАД  $\rightarrow$  переход к вопросу Q60

#### Q50.С кем Вы преимущественно употребляете инъекционные наркотики?

Интервьюер: ПРОЧИТАЙТЕ ВАРИАНТЫ . Только один ответ.

- 1. Индивидуально
- 2. В постоянной группе
- 3. В случайной группе
- 4. Зависит от обстоятельств

#### **Q51.Какие** наркотики Вы принимаете путем инъекции наиболее часто?

Интервьюер: Возможно несколько ответов.

- 1. ХАНКА (СЫРОЙ ОПИУМ)
- 2. ГЕРОИН
- 3. ДРУГОЕ

#### Q52.Откуда был шприц, когда Вы употребляли наркотики путем инъекций в последний раз?

- 1. КУПИЛ В АПТЕКЕ
- 2. КУПИЛ В ДРУГОМ МЕСТЕ
- 3. ПОЛУЧИЛ В ПУНКТЕ ОБМЕНА ШПРИЦЕВ
- 4. ИСПОЛЬЗОВАЛ ШПРИЦ ДРУГА/ЗНАКОМОГО
- 5. ДРУГОЕ
- 6. НЕ ЗНАЮ/НЕ ПОМНЮ

Q53.В последний раз, когда Вы употребляли наркотики путем инъекций, пользовались ли Вы общей иглой или шприцем?

- 1. ДА
- 2. HET
- 3. НЕ ЗНАЮ/НЕ ПОМНЮ

#### Q54.3а последние 4 недели Вам доводилось ...

Интервьюер: ПРОЧИТАЙТЕ КАЖДЫЙ ВОПРОС И ПОЛУЧИТЕ НА НИХ ОТВЕТЫ.

						ДА	HET	Не знаю
Пользоваться	общим	шприцем	вместе	С	другими	1	2	8
потребителями								
наркотиков								
Забирать наркот	ики из обц	цей емкости				1	2	8
Пользоваться го	товым рас	створом без е	его кипячен	ния		1	2	8
Обменивать исп	ользованн	ый шприц на	новый			1	2	8

55.Сколько раз Вы употребляли инъекционные наркотики вчера? солько разных шприцов Вы использовали вчера?						
Q56.Со сколькими людьми Вам пришло недели? ВСЕГО: С кем из них Вы делали это впервые?	ось пользоваться общим шприцем за последние четыре КОЛИЧЕСТВО НОВЫХ:					

Q57.Вы можете достать новый шприц в любой момент, когда Вам это необходимо?

- ВСЕГДА → переход к вопросу Q59
- 2. ИНОГДА
- 3. НИКОГДА

Q58.ЕСЛИ «ИНОГДА» или «НИКОГДА», то почему не всегда?

Интервьюер: ВАРИАНТЫ НЕ ПРЕДЛАГАТЬ

- 1. НЕТ ДЕНЕГ
- 2. ПУНКТ ОБМЕНА ШПРИЦЕВ НАХОДИТСЯ ДАЛЕКО

MEASURE Evaluation 217 3. КИОСК ИЛИ АПТЕКА НАХОДЯТСЯ ДАЛЕКО 4. БОЯЗНЬ ПОЛИЦИИ 5. НЕ СЧИТАЮ НЕОБХОДИМЫМ РИОБРЕТАТЬ НОВЫЕ ШПРИЦЫ 6. ДРУГОЕ \_\_\_\_\_ Q59.Сколько лет Вы употребляете инъекционные наркотики? КОЛИЧЕСТВО ЛЕТ КОЛИЧЕСТВО МЕСЯЦЕВ ИНТЕРВЬЮЕР: СПРАШИВАТЬ У ВСЕХ РЕСПОНДЕНТОВ НЕЗАВИСИМО ОТ ТОГО, ПОТРЕБЛЯЮТ ОНИ НАРКОТИКИ ИЛИ НЕТ Q60.Вас когда-нибудь задерживала полиция за потребление инъекционных наркотиков? 1. ДА 2. HET → переход к вопросу Q63 **Q61.ЕСЛИ ДА**, как Вы считаете, было ли Ваше задержание зарегистрировано? 1. ДА 2. HET  $\rightarrow$  переход к вопросу Q63 Q62.ЕСЛИ ДА, как Вы считаете, в настоящее время Вы состоите на учете в полиции как наркопотребитель? 1. ДА 2. HET → переход к вопросу Q63 ЕСЛИ ДА, с какого времени Вы состоите на учете в полиции как наркопотребитель? МЕСЯЦ\_\_\_\_\_, ГОД\_\_\_\_\_ Q63.Вы когда-нибудь обращались или Вас приводили к наркологу или в наркологический диспансер за потребление наркотиков? 1. ДА 2. HET → переход к вопросу Q66 Q64.ЕСЛИ ДА, то Вы когда-нибудь состояли на учете в наркологическом диспансере? 1. ДА 2. HET  $\rightarrow$  переход к вопросу Q66 **Q65.ЕСЛИ ДА, в настоящее время Вы состоите на учете в наркологическом диспансере?** 1. ДА 2. HET  $\rightarrow$  переход к вопросу Q66 ЕСЛИ ДА, с какого времени Вы состоите на учете в наркологическом диспансере? МЕСЯЦ\_\_\_\_\_\_, ГОД\_\_\_\_\_ Q66.По Вашему мнению, ВИЧ/СПИД является ли проблемой в городе Караганды?

- 1. Серьезная проблема
- 2. Незначительная проблема
- 3. Это не проблема
- 4. Не знаю

Проблема СПИДа в Караганды становится все более актуальной. Поэтому нам важно оценить уровень знаний о ВИЧ/СПИДе и путях его передачи. По Вашему мнению, как можно заразиться ВИЧ/СПИДом?

#### Q67.Можно ли заразиться ВИЧ/СПИДом ...

Интервьюер: ПРОЧИТАЙТЕ КАЖДЫЙ ВОПРОС И ПОЛУЧИТЕ НА НИХ ОТВЕТЫ

	ДА	HET	Не знаю
При половом контакте без презерватива	1	2	8
При употреблении наркотиков общим шприцом	1	2	8
При пользовании общей посуды для приема пищи	1	2	8
При купании в общем бассейне	1	2	8
При укусе насекомого	1	2	8
При рукопожатии	1	2	8

**Q68.Как можно снизить риск или избежать заражения ВИЧ/СПИДом? Какие способы Вы знаете?** *Интервьюер: не зачитывайте ответы. Возможно несколько ответов.* 

- 1. ИСПОЛЬЗОВАТЬ ПРЕЗЕРВАТИВЫ
- 2. ИМЕТЬ НЕБОЛЬШОЕ КОЛИЧЕСТВО ПОЛОВЫХ ПАРТНЕРОВ
- 3. ОБА ПАРТНЕРА ДОЛЖНЫ СОХРАНЯТЬ ВЕРНОСТЬ ДРУГ ДРУГУ
- 4. ИЗБЕГАТЬ СЛУЧАЙНЫХ ПОЛОВЫХ СВЯЗЕЙ
- 5. ОТКАЗАТЬСЯ ОТ СЕКСА ВООБЩЕ
- 6. ОТКАЗАТЬСЯ ОТ УСЛУГ КОММЕРЧЕСКОГО СЕКСА
- 7. ИЗБЕГАТЬ СОВМЕСТНОГО ИСПОЛЬЗОВАНИЯ ШПРИЦЕВ
- 8. ИЗБЕГАТЬ ПЕРЕЛИВАНИЯ КРОВИ
- 9. ДРУГОЕ (УКАЗАТЬ) \_\_\_\_\_
- 10. HE 3HAЮ

## Q69.По Вашему мнению, насколько эффективны презервативы для защиты от инфекций передающихся половым путем включая ВИЧ?

- 1. Очень эффективны
- 2. Иногда эффективны
- 3. Не очень эффективны
- 4. Не эффективны вообще
- 5. Не знаю

#### Q70.По Вашему мнению, какая вероятность Вашего заражения вирусом СПИДа?

- 1. Очень высока
- 2. Не очень высока
- 3. Низкая вероятность
- 4. Нет такого риска
- 5. Не знаю

\_\_\_\_\_

Q71.Может ли человек, имеющий здоровый вид, быть инфицированным ВИЧ/СПИДом?

- 1. ДА
- 2. HET
- 3. НЕ ЗНАЮ

#### Q72.Где в Караганды можно сдать кровь из вены на ВИЧ?

Интервьюер: не зачитывайте ответы. Возможно несколько ответов.

- 1. Центры СПИД
- 2. Кожно-венерологический диспансер
- 3. Больница/поликлиника
- 4. Не знаю/Не помню
- 5. Другое\_\_\_\_\_

#### Q73.Сколько раз Вы сдавали кровь из вены на ВИЧ/СПИД за последние 12 месяцев?

КОЛИЧЕСТВО ТЕСТОВ \_\_\_\_

НЕ СДАВАЛ (A) КРОВЬ ИЗ ВЕНЫ НАВИЧ\СПИД 0  $\rightarrow$  переход к вопросу Q76

Q74.Ваша последняя проверка на ВИЧ/ СПИД была добровольной или обязательной (по направлению)? То есть, было ли это Вашим выбором или Вас к этому обязали?

- 1. ДОБРОВОЛЬНАЯ
- 2. ОБЯЗАТЕЛЬНАЯ

Q75.При последней сдаче крови на ВИЧ объясняли ли Вам пути заражения и давали другую информацию о ВИЧ?

- 1. ДА
- 2. HET

Q76.Хотели бы Вы пройти тест на ВИЧ, если бы это было по-настоящему анонимно?

- 1. ДА
- 2. HET

Q77.Слышали ли Вы когда-либо об инфекциях передающихся половым путем?

- 1. ДА
- 2. HET  $\rightarrow$  переход к вопросу Q79 ИЛИ Q87

**Q78.Если ДА, то, какие признаки и симптомы заставили бы Вас думать о наличии инфекций передающихся половым путем?** <u>Интервьюер</u>: НЕ ЗАЧИТЫВАЙТЕ ОТВЕТЫ. ВОЗМОЖНО НЕСКОЛЬКО ВАРИАНТОВ ОТВЕТОВ

- 1. Боли внизу живота
- 2. Выделения из влагалища/пениса
- 3. Зуд в области гениталий
- 4. Боли при мочеиспускании
- 5. Боли во время полового акта
- 6. Язвы на гениталиях
- 7. Воспаления в области гениталий
- 8. Кровь в моче

WENGORE Evaluation	220
9. Нарушения мочеиспу 10. Потеря веса 11. Импотенция/Бесплод 12. Нет симптомов 13. Не знаю 14. Отказ от ответа 15. Другое (запишите)	
вопросы только для	женщин:
Q79.Вступали ли Вы	в сексуальные отношения за деньги или другое материальное ние последних 3 месяцев?
1. ДА	
2. НЕТ → переход к в	опросу Q85
РЕСПОНДЕНТ-МУЖЧИН	IA 9
	е, пожалуйста, количество мест, где Вы искали клиентов в течение цель. Количество мест
<b>Q81.ЕСЛИ ДА, из этих м</b> кодов: Идентификация м	мест укажите названия тех мест, где Вы чаще всего искали клиентов? <u>Для</u> ест по участкам.
Места:	
1	
2	
3	
Q82.В последний раз,	когда Вы вступали в сексуальные отношения за деньги или другое ждение использовали ли Вы презерватив?
1. ДА	
2. НЕТ → переход к во	просу Q84
<b>Q83.ЕСЛИ ДА</b> , <b>кто прин</b> я 1. Я	ял решение об использовании презерватива? 
2. Мой партнер	→ переход к вопросу Q85
3. Мой партнер и Я	
4. Не помню	
Q84.ЕСЛИ НЕТ, кто был	। против использования презерватива?

- 1. Партнер был против
- 2. Я не люблю использовать презервативы
- 3. Я доверяю своему партнеру
- 4. Я боюсь подозрений со стороны партнера
- 5. Использую другие контрацептивы
- 6. Презервативы очень дорогие
- 7. Не имел(а) при себе презерватива
- 8. Презервативы не защищают от ИППП/СПИД
- 9. Низкое качество презервативов/презервативы рвутся
- 10. Другое \_\_\_\_\_

Q85.Не замечали ли Вы у себя в последние 4 недели такие симптомы.....

Симптомы	ДА	HET
Боли внизу живота, не связанные с менструацией	1	2
Необычные выделения	1	2
Язвочки	1	2

Q86.Если у Вас были какие-либо из вышеназванных симптомов, то получали ли вы лечение за последние 4 недели?

	ДА	HET
Лечилась самостоятельно	1	2
У частнопрактикующего врача	1	2
Поликлиника/Больница	1	2
Не лечилась	1	2

#### вопросы только для мужчин:

Q87.Платили ли Вы кому-нибудь деньги или делали материальное вознаграждение в другой форме за сексуальные услуги в течение последних 3 месяцев?

- 1. ДА
- 2. HET
- 3. НЕ ПОМНЮ

РЕСПОНДЕНТ-ЖЕНЩИНА 9

Q88.Занимались ли Вы сексом с мужчиной в течение последних 4-х недель?

- 1. ДА
- 2. HET
- 3. НЕ ПОМНЮ

Q89.Не замечали ли Вы у себя в последние 4 недели такие симптомы....

Симптомы	ДА	HET
Боли при мочеиспускании	1	2
Необычные выделения	1	2
Язвочки	1	2

Q90.Если у Вас были какие-либо из вышеназванных симптомов, то получали ли вы лечение за последние 4 недели?

	ДА	HET
Лечилась самостоятельно	1	2
У частнопрактикующего врача	1	2
Поликлиника/Больница	1	2
Не лечилась	1	2

СПАСИБО ЗА ВАШЕ УЧАСТИЕ!

### Appendix 4 - Maps

## Figure A1. Interviews Completed at Sites in Karaganda

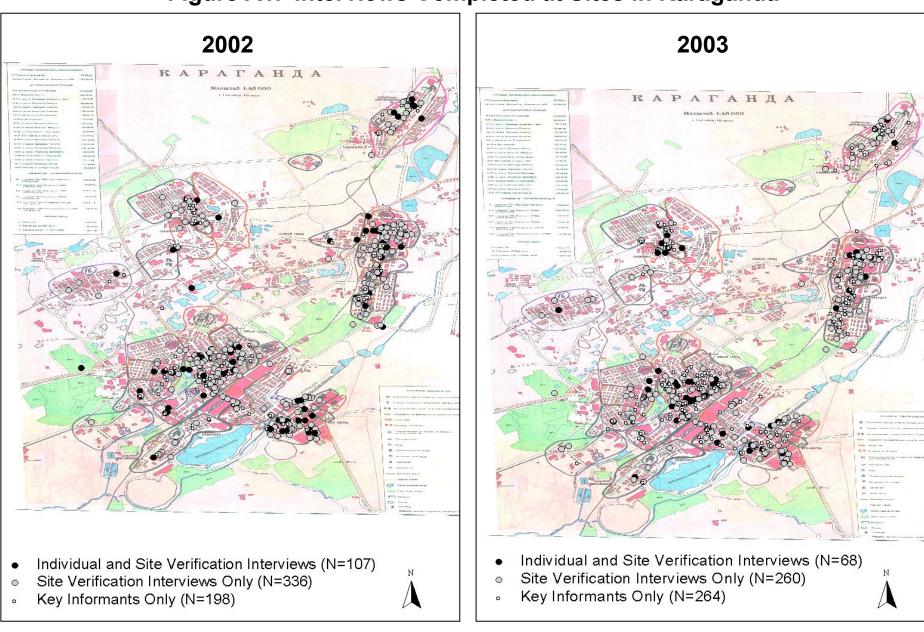
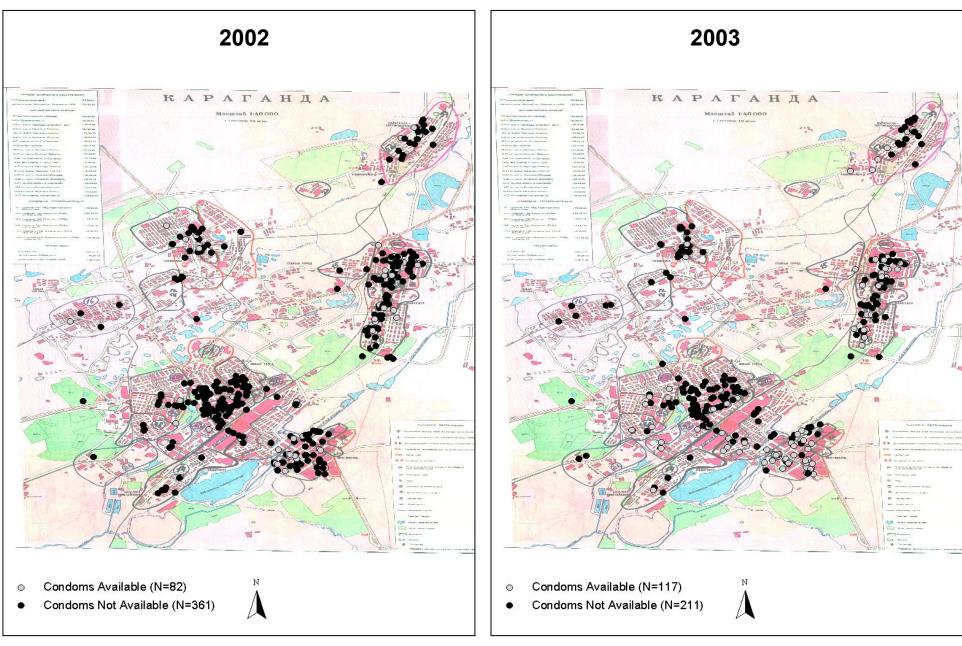


Figure A2. Condoms Seen at Site on Day of Interview in Karaganda



### Figure A3. Priority Sites in Karaganda

